



# VENEZUELA MULTISECTOR RAPID ASSESSMENT

VENEZUELA  
CRISIS  
RESPONSE

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Alberto Gulin, World Vision Venezuela Response Office

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Michelle Mitchell, World Vision, LAC

# ACRONYMS

**CLAP:** Local Supply and Production Committees

**FAO:** Food and Agriculture Organization

**HH:** Household

**HRP:** Humanitarian Response Plan

**IDP:** Internally displaced people

**INE:** National Institute of Statistics

**KII:** Key informant interview

**LAC:** Latin America and the Caribbean

**PAHO:** Pan American Health Organization

**WFP:** World Food Programme

**WV:** World Vision

# EXECUTIVE SUMMARY

Venezuela is facing a humanitarian crisis that driven by ongoing political instability, a deteriorating socioeconomic situation and growing insecurity and violence. Almost all Venezuelans are affected by hyperinflation, the collapse of salaries, shortages of food and medicines, lack of education and health services and deteriorated of basic infrastructure including water and sanitation, electricity and public transportation, leading to the largest exodus in Latin America and the Caribbean's modern history.

In March 2020, World Vision carried out a multi-sector rapid assessment survey in five states in Venezuela: Caracas, Lara, Miranda, Táchira and Zulia, collecting a total of 1,388 household surveys and 35 key informant interviews covering 12 municipalities and 12 communities. The purpose of the assessment is to identify primary needs and perceived potential solutions in programme sectors such as health, WASH, livelihoods, protection and non-food items (NFIs). The study also seeks to understand the level of digital literacy amongst the population and humanitarian accountability mechanisms in Venezuela.

Overall, around 77 per cent of the surveyed population were women. Seventy seven percent of households interviewees. Among key informants, 60 per cent of the sample were female (KII). The high participation of women is explained by the fact that 54 per cent of households interviewed are female-headed. The age distribution of the household members shows that about 50 per cent of the members of the household are between 18 and 59 years old, 40 per cent are minors mostly between 6 and 17 years old, and the remaining 10 per cent are member over 60 years old.

In terms of household composition, half of the households in the twelve selected communities have between of 2-4 members, and 38 per cent of households have between five and eight members overall. In conclusion, the average household size in the communities of the selected States is 4.7 members, which can be rounded up to five members per household. Comparing with data from the last Population Census it is possible to note a significant increase in the average number of people living by house from 3.9 members estimated for 2011.

Nine out of ten households report being extended families. Regarding if the household hosting migrants (internal or external), only 7 per cent report to be a host household. Zulia is the state with the highest number of households hosting IDP people with 5.1 per cent, following by Caracas 2.3 per cent and Miranda 1.6 per cent. The current national crisis has had an impact at the community level, with 27 per cent of the people consulted report that households have fewer members, the vast majority of whom have migrated to countries in the region, mainly Colombia, as well as to other European countries. This pattern is also explained by internal migratory flows, and by the deaths of its members.

## KEY FINDINGS PER SECTOR

Overall, the top three problems identified are regarding the access to water (22.4 per cent), followed by access to food (22 per cent) and the conditions of roads and general infrastructure in the communities (18 per cent).

**WASH** - Limited household access to water due to lack of infrastructure, poor quality of service and high costs. According to the information collected through key informants, the main sources of water in the communities are reported to include: aqueduct, the use of pumps, tanks, and bottles and bags of water purchased in the store. The context is aggravated by the fact that 7 out of 10 household report that their access to tanks or other containers for water storage is either non-existent (45 per cent) or partial (30 per cent).

**Food Security** - High risk to food insecurity as food prices continue to rise and employability conditions in communities are limited. According to key informants, there is food supply but with certain shortages in some items in the communities. This situation is aggravated by the fact that the prices of products have increased over the last years. Food is reported to be obtain at markets, local shops, street vendors and supermarkets,

**Roads & Infrastructure:** The condition of roads and general infrastructure in communities limit households' access to quality livelihoods, to the extent that it offers limitations on access to markets and provides an inefficient quality of services. Regarding access to electricity service, it is only partially supplied in the selected communities from Lara, Táchira and Zulia, and it is estimated that on average the communities do not have the service for about 6 hours per day.

**Health-** Low quality of health services due to limited access to medicines, infrastructure damages and shortage of medical staff. Three out of ten households report to have members with critical health conditions that demand constant medical attention as well as the supply of medicines. According to key informants, all communities have a health centre but in 6 out of the 9 the infrastructure has massive damage that does not make it safe to use.

**Protection-** High perception of insecurity in the communities, especially due to the absence of safe spaces for children; as well as the lack of functioning state agencies to ensure the protection of the most vulnerable. The most vulnerable population groups are children who are separated from their parents and/or relatives, those who drop out of school and female-headed households. Additionally, it is reported the existence of cases of unaccompanied children and children living without parents and close relatives.

**Education-** High risk of student dropouts as schools have considerable damage to their infrastructure and teachers call strikes for non-payment. About the problems of school infrastructure, according to key informants, school buildings have significant damage that makes their use unsafe.

**Livelihoods:** lack of employment opportunities at community level that reduced the ability of households to meet their basic needs. It is estimated that eight out of 10 households in Venezuela are poor; 61 per cent of them reported to be in extreme poverty. The main household source of income are pension funds (26 per cent), aid or charity (11 per cent), and remittances (8 per cent). Since the crisis the main activities carried out by the households to earn income and meet their basic needs are the development of formal salary (34 per cent), casual (daily) work (31 per cent) and trade (25 per cent).

**Non-Food Items-** Households have low coverage of their basic needs, including access to clothing and footwear; water storage tanks and buckets, among others with a coverage rate of less than 50%, which suggests that half of the population has partial or no coverage of their NFIs. The needs with the lowest coverage rate are Clothing and footwear; water storage tanks and containers, and buckets.

**Communication-** Limited connectivity to mobile and cell phone services. Regarding preferred channels for communication, communities prefer face-to-face communication mechanisms that allow direct interaction with those in charge of project implementation. Finally, it is possible to observe a high insertion of households in the financial system and in the use of its channels.



# INTRODUCTION



Alberto Gulin, World Vision Venezuela Response Office

Venezuela is facing a humanitarian crisis that driven by ongoing political instability, a deteriorating socioeconomic situation and growing insecurity and violence. Almost all Venezuelans are affected by hyperinflation, the collapse of salaries, shortages of food and medicines, lack of education and health services and deteriorated of basic infrastructure including water and sanitation, electricity and public transportation, leading to the largest exodus in Latin America and the Caribbean's modern history.<sup>1</sup>

According to the Central Bank of Venezuela (CBV, 2018), it is estimated that between 2013 and 2018 the country's economy receded 50 per cent. The International Monetary Fund projected, before the global crisis caused by the COVID-19 pandemic, an additional reduction of 25 per cent in the GDP (IMF, 2019). Oil exports, one of Venezuela's critical income sources, have also experienced a 62 per cent reduction between 2015 and 2018.

<sup>1</sup> IOM Appeal Venezuela Crisis Response (September 2019)



Alberto Gulin, World Vision Venezuela Response Office

Over 5.2 million Venezuelans<sup>2</sup> have fled the country due to political unrest, food shortages, and a collapsing healthcare system. Inside Venezuela and in surrounding countries, children and elderly people are particularly at risk of hunger, illness, and other vulnerabilities. Political instability, human rights' abuses and socio-economic collapse in Venezuela continue to force the exodus of millions of refugees and migrants. It is estimated that another 5,000 people migrate daily (WEF, 2019), and that since 2014 there has been a 4,000 per cent increase in the number of Venezuelans seeking refugee status (UNHCR, 2019).

Inflation, loss of purchasing power and reduced domestic production have negatively impacted the quality of life of Venezuelans. The National Consumer Price Index (CBV, 2019) shows that price of food and other commodities rose over 1,000 per cent between December 2018 and April 2019. According to the Documentation and Analysis Centre for Workers, in April 2020 a monthly minimum wage could afford 0.9 per cent of the food basket. This means that, in average, a family needs up to 116 minimum wages to cover the food basket (minimum wage May 2020= 4000,000 Sovereign bolivar- BsS / US 2,33).

Within this context, World Vision is responding to the Venezuelan crisis by implementing programs in over seven countries, including Venezuela, which are receiving the largest number of Venezuelan refugees. In 2019, World Vision launched the Venezuela Crisis Response

Plan called Hope without Borders. The plan requires US\$80 million to reach 300,000 people in the region, in partnership with UN agencies and local organizations<sup>3</sup>.

As of May 2020 World Vision, World Vision has reached more than 284,000 people in need in Brazil, Bolivia, Chile, Colombia, Ecuador, Peru and Venezuela. World Vision has provided improved access to cash, food, potable water; shelter; health services and hygiene items for the most vulnerable as well as protection services that include psychosocial support for children and parents and referrals of at risk children for individual case management.

In March 2020, World Vision carried out a multi-sector rapid assessment survey in five states in Venezuela: Caracas, Lara, Miranda, Táchira and Zulia, collecting a total of 1,388 household surveys<sup>4</sup> and 35 key informant interviews<sup>5</sup> covering 12 municipalities and 12 communities. The purpose of the assessment is to identify primary needs and perceived potential solutions in programme sectors such as health, WASH, livelihoods, protection and non-food items (NFIs). The study also seeks to understand the level of digital literacy amongst the population and humanitarian accountability mechanisms in Venezuela. The results will support the design of World Vision's response in Venezuela by offering relevant data that will strengthen the identification of needs and challenges faced by the most vulnerable population.



Alberto Gulin, World Vision Venezuela Response Office

<sup>2</sup> Last data available from July 5, 2020. <https://r4v.info/es/situations/platform>

<sup>3</sup> World Vision – Venezuela Crisis. <https://www.wvi.org/emergencies/venezuela-crisis>

<sup>4</sup> Caracas: 257, Lara: 320, Miranda: 82, Tachira: 384, Zulia: 345

<sup>5</sup> Caracas: 5, Lara: 7, Miranda: 6, Tachira: 10, Zulia: 7

# ASSESSMENT OBJECTIVE



Mishelle Mitchell, World Vision LAC

The rapid assessment aims to identify current needs and listen to perceived causes viewed by affected population as priorities, as well as the corresponding suggestions on how to address them, taking into consideration their possible contributions. The information collected will be used to help inform World Vision response efforts and provide an opportunity for the affected population to participate in decisions that will impact their lives.

This assessment focuses on the following aspects: household demographics including migration patterns (if any), livelihoods and basic needs, protection, humanitarian accountability, problems and solutions in areas such as health, WASH, food, infrastructure, education, security and protection, among others and digital literacy.



Alberto Gulin, World Vision Venezuela Response Office

World Vision, along with its partners Alimenta la Solidaridad and local churches, conducted a multisector rapid assessment in five Venezuelan states between February and March 2020.

The data collection process lasted one month, and was coordinated by a multidisciplinary team who designed, validated the tools, and provided technical training as well as guidance to the local enumerators selected.

### 3.1 Data collection tools

Quantitative and qualitative data were collected at community level using two types of tools adapted to the national context:

- ▶ **Household survey (HH-Basic Rapid Assessment Tool –BRAT);** including 56 questions distributed among 7 sections. The questionnaire collected information regarding demographic characteristics of the households, access to livelihoods, protection services, non-food items, accountability mechanisms, and the level of digital literacy. One of the key sections of the survey was the one devoted to problems and solutions, where participants were asked to mention the top 3 problems affecting their communities, the causes and possible solutions to address them.
- ▶ **Key informant interviews (CL- Basic Rapid Assessment Tool -BRAT):** the questionnaire was applied to community leaders. The 35 questions divided in four sections (community demographics, community resources, market system and mapping of organizations and the support they provide) provided a snapshot of the community living conditions.

To enhance the findings of primary data collection tools, a secondary data review was carried out with focus on the areas of study included

in the assessment. Secondary data was used to support the results obtained from the tools mentioned above. Secondary sources of information included assessments and databases from international organizations working in Venezuela. It is important to mention that most of the studies analyzed did not have the same geographical scope of this rapid assessment; however, they can provide information about national trends in key issues analyzed.

### 3.2 Data collection and analysis

A total of 10 enumerators from each state were selected based on knowledge of the area, experience in data collection and interpersonal skills. The selected enumerators were from local churches or *Alimenta la Solidaridad*. A multidisciplinary team<sup>6</sup> was set up including one (1) Supervisor from Colombia who provided the leadership, expertise and research skills to guide team leaders for each state. Team leaders oversaw planning, coordination, supervision and management of data collection at field level. Enumerators played the most important role during data collection.

### Training

Enumerators participated in a one-day orientation to review and validate the data collection tools and ensure common understanding.

The training reviewed the following topics: objectives and methodology of the assessment, safeguarding policy, analysis of the surveying tools' structure, use, configuration and practice with KoBo Collect, logistic organization of fieldwork and pre-test of survey. Each enumerator received a smartphone to be used during the data collection process, with KoBo app downloaded.

In addition to the training workshop, enumerators reviewed the sampling methodology, and at the end of each working day, they participated in a debriefing session to evaluate the collected data and to identify the lessons learnt and challenges.

<sup>6</sup> **Multidisciplinary team composition:** assessment team lead (1), assessment advisors (2), logistics & administrative support (2), technical leads, security (2), team leaders (4).

It is important to mention that prior to the fieldwork, and to ensure that the survey data comply with quality standards; a one-day ToT with the Team Leaders/ Supervisors was conducted on the objectives of the assessment.

### Pre Test

The survey team (enumerators) field-tested the survey questionnaire in non-sampled locations. The objectives of this pilot test were:

- ▶ Evaluate if the questions were acceptable to the householders, (i.e. not causing offense or embarrassment that would interfere with the successful completion of interviews).
- ▶ Ensure that the language and terminology of research tools were clear to the target population.
- ▶ Familiarize enumerators with the data collection tools through practicing the sampling methodology on randomly selected households.
- ▶ Refine and improve the quality of the assessment questionnaire.

### 3.3 Ethical considerations

Verbal Consent was requested to all interviewees following an explanation of the purpose and process of the assessment, and its methodology.

The data collection strategy in the selected communities required a low profile display and working closely with our field partners, *Alimenta la Solidaridad* and local churches, due to security considerations, since they already have a well-trusted presence and extensive operational footprint in the targeted communities.

### 3.4 Sampling

This rapid assessment implemented two sampling methodologies. For the collection of quantitative data (household survey), a two-phased proportional

stratified random sample was used. Each household is considered our primary sampling unit and sample frame of the total targeted population in each State. For the collection of qualitative data, through key informants interview, a purposive sampling was used in nine of the twelve communities.

The twelve (12) communities involved in the assessment were selected based on priority areas and availability of secondary data and reports. However, for the respondent selection, random method using the ball pen toss and random walk methods were employed.

For the purposive selection of the states and communities, the following criteria (see table 1) was used

including- The criteria included HRP priorities, the level of presence of other organizations, presence of partner *Alimenta la Solidaridad* and/or Faith Based Organizations, per cent of people in need, levels of food insecurity, among others.

The data collection in the states focused in the most populated areas (capitals and biggest cities) where *Alimenta la Solidaridad* and/or local church has a strong established presence with communities. These criteria ensure that geographical areas selected have also logistics and coordination mechanisms already in place that will enhance future interventions from World Vision. Additionally, to ensure good security conditions for the protection of the team collecting the information.

Table 1: Selection criteria for the identification of selected States.

Ítem/State	Caracas	Lara	Miranda	Tachira	Zulia
Prioritized state in HRP 2020 <sup>7</sup>	Yes	No	Yes	Yes	Yes
Presence of other organizations <sup>8</sup>	Yes	Yes	Yes	Yes	Yes
Quantity of organizations	25	10	32	22	24
Ranking presence of organizations	2	7	1	5	3
<i>Alimenta la Solidaridad</i> presence	Yes	Yes	Yes	Yes	Yes
<i>Faith based organization (FBO)</i> presence	Yes	Yes	Yes	Yes	Yes
People in need <sup>7</sup>	456.6k	483.3k	813.4k	277.9k	1,037.3k
Total population (2020 projection) <sup>9</sup>	2,090,479	2,066,916	3,323,073	1,279,248	4,366,634
% people in need	22%	23%	24%	22%	24%
% of women in need	55%	54%	56%	54%	56%
Ranking people in need	5	4	2	11	1
Border state	No <sup>i</sup>	Yes	No	Yes	Yes
Humanitarian coordination hub <sup>7</sup>	Yes	No <sup>ii</sup>	Yes	Yes	Yes
Prevalence of severe food insecurity <sup>10</sup>	< 6.6%	< 6.6%	< 6.6%	6.6% - 10.8%	> 10.9%
State of origin from the Venezuela Diaspora <sup>11iii</sup>	13.1% (top 2)	7.8% (top 4)	4.8% (top 7)	5.4% (top 6)	13.8% (top 1)

- i. Miranda and Distrito Capital are part of the Metropolitan area of Venezuela
- ii. Covered by the Humanitarian Coordination Hub based in Maracaibo, Zulia
- iii. Level of external migration

<sup>7</sup> Humanitarian Response Plan - Venezuela 2020. Available at: [https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/venezuela\\_hrp\\_2020\\_es\\_vf.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/venezuela_hrp_2020_es_vf.pdf)

<sup>8</sup> Humanitarian response. Humanitarian Presence by State, Venezuela. March 2020. Available at [https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/20200521-ve00-5w\\_4pager\\_es\\_v3.pdf](https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/documents/files/20200521-ve00-5w_4pager_es_v3.pdf)

<sup>9</sup> Nations Statistics Institute (INE). Population projections. <http://www.ine.gov.ve/documentos/Demografia/SituacionDinamica/Proyecciones/xls/Entidades/Nacional.xls>

<sup>10</sup> WFP. Assessment of food security in Venezuela. July – September, 2019. Available at [https://reliefweb.int/sites/reliefweb.int/files/resources/WFP\\_VEN\\_FSA\\_Main%20Findings\\_2020\\_espanol\\_final.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/WFP_VEN_FSA_Main%20Findings_2020_espanol_final.pdf)

<sup>11</sup> OIM (2019) "ANÁLISIS DE LAS ENCUESTAS DE MONITOREO DE FLUJOS DE NACIONALES VENEZOLANOS EN SUDAMÉRICA - Colombia, Ecuador y Perú 2018". Available at: <https://reliefweb.int/report/colombia/lisis-de-las-encuestas-de-monitoreo-de-flujos-de-nacionales-venezolanos-en-sudam>

## Sample Size and data cleaning

**HH survey:** a two-phased proportional stratified random sampling was used, with the primary sampling unit as the household and sample frame of total population of the targeted communities per State. The first phase involved purposively selecting Municipalities within the targeted States and the second phase, involved a randomly selection of households among the selected communities through a random walk exercise<sup>12</sup>. Overall, sample size has the standard 95% confidence level, 8 per cent confidence interval and 50 per cent response distribution.

A total of 1,388 observations (see table 2) were collected among the twelve communities identified, representing a response rate of 93 per cent. Only 112 household refused to participate in the survey.

The database of the household survey was processed using Microsoft Excel, SPSS and R. A data cleaning process was conducted before it was process using correction of age reported and household size, creation of categories of responses collected under the category of "Other". The cleaning process was made by using cross tabulation of variables to spot data inconsistencies.

Table 2: Number of household surveys and key informants interviews disaggregated by State and sex.

States	Municipality	Community	Household Surveys					KII			
			Total	Men	Women	Other	%	Total	Men	Women	%
Caracas	Libertador	Sucre	257	51	206	-	18.5	5	1	4	14.2
Lara			320	72	248	-	23.1	7	2	5	20.0
	Iribarren	Juan de Villegas	241	48	193	-	17.4	5	1	4	14.2
	Palavacino	José Gregorio Bastidas	34	13	21	-	2.4	2	1	1	5.7
	Torres	Trinidad Samuel	45	11	34	-	3.2	-	-	-	.*
Miranda			82	10	72	-	5.9	6	3	3	17.1
	Guacaipuro	Los Teques	51	3	48	-	3.7	3	2	1	8.6
	Sucre	Petare	31	7	24	-	2.2	3	1	2	8.6
Tachira			384	103	279	2	27.7	10	5	5	28.6
	Jáuregui	Jáuregui	56	16	40		4.0	-	-	-	-
	Junin	Junín	50	11	38	1	3.6	3	2	1	8.6
	San Cristobal	La Concordia	278	76	201	1	20.0	7	3	4	20.0
Zulia			345	129	215	1	24.9	7	3	4	20.0
	Cabimas	Ambrosio	53	15	38	-	3.8	-	-	-	-
	Maracaibo	Cristo de Aranza	217	88	128	1	15.6	4	1	3	15.6
	San Francisco	San Francisco	75	26	49	-	5.4	3	2	1	5.4
<b>TOTAL</b>			<b>1,388</b>	<b>365</b>	<b>1,020</b>	<b>3</b>	<b>100</b>	<b>35</b>	<b>14</b>	<b>21</b>	<b>100</b>

12 The random walk exercise included selecting a random start point and then proceed to select the households. In urban areas a household was selected every five (5) housed and in the urban areas every three. The difference is explained by the population density in both areas.

Finally, an expansion factor<sup>13</sup> was estimated to provide weighted estimations representative of the entire population of the twelve communities selected.

**KII-CL:** the community leaders were purposively selected in nine of the twelve communities where the HH survey was conducted. A total of 35 in-

terviews (see table 2) were collected among nine (9) communities. The descriptive analysis of the data collected was done using Microdot Excel. It is important to mention that in the questions where the key information were requested to provide a quantity, the average was estimated and it is the number reported in this report.

13 Expansion factor estimations: Caracas (257), Lara (320), Miranda (82), Tachira (384), Zulia (345). The number in parenthesis means the number of households each observation is representative for.



# LIMITATIONS OF THE RAPID ASSESSMENT IV

Alberto Gulin, World Vision Venezuela Response Office

The following are some limitations faced during the rapid assessment process:

- ▶ **Security:** Prevalence of crime in the selected communities required mitigation measures such as security briefing sessions prior to field work, close coordination with key focal points from each community to comply within the hours allowed to operate, and the design of a mitigation process in case the team could not complete field work for security reasons. Precisely, due to security hazards, the community Garcia de Hervia, in Tachira, was substituted by the community Jáuregui, in the same state.
- ▶ **Transportation:** the access to fuel for transportation was a challenge during the data collection process, however, it was addressed through coordination with partners' staff and local community leaders. The delays to get some locations required to speed up data collection.
- ▶ **Connection to communication network:** most of the communities included in this assessment lack regular access to connectivity, which was challenging for logistics coordination. This situation was addressed by ensuring communications with focal points at hours with stable signal and by anticipating coordination.
- ▶ **Data stratification by socioeconomic variables:** as mentioned above, the sampling method implemented was a two-phased proportional stratified random sampling. Random selection of households on stratification was completed by key socioeconomic variables (e.g. age, gender, socioeconomic level, and people with disabilities, among others). All population groups had equal probabilities of selection. Based on the results of this rapid assessment, World Vision will evaluate the necessity to carry out additional studies with a more in-depth analysis of the most vulnerable population groups observed.
- ▶ **Availability of updated national databases:** during the elaboration of this report, the availability of up dated national databases for key socioeconomic sectors such as education, health, public services, among others was particularly difficult. Researchers mapped evaluations completed by peer organizations in different states, which allowed identifying key trends and indicators that were compared with the findings from of this assessment.

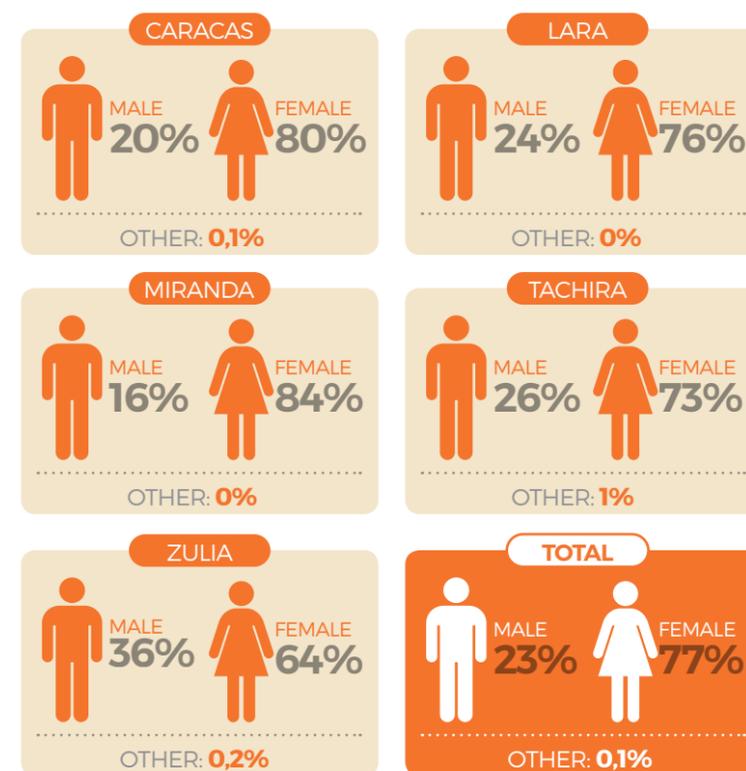


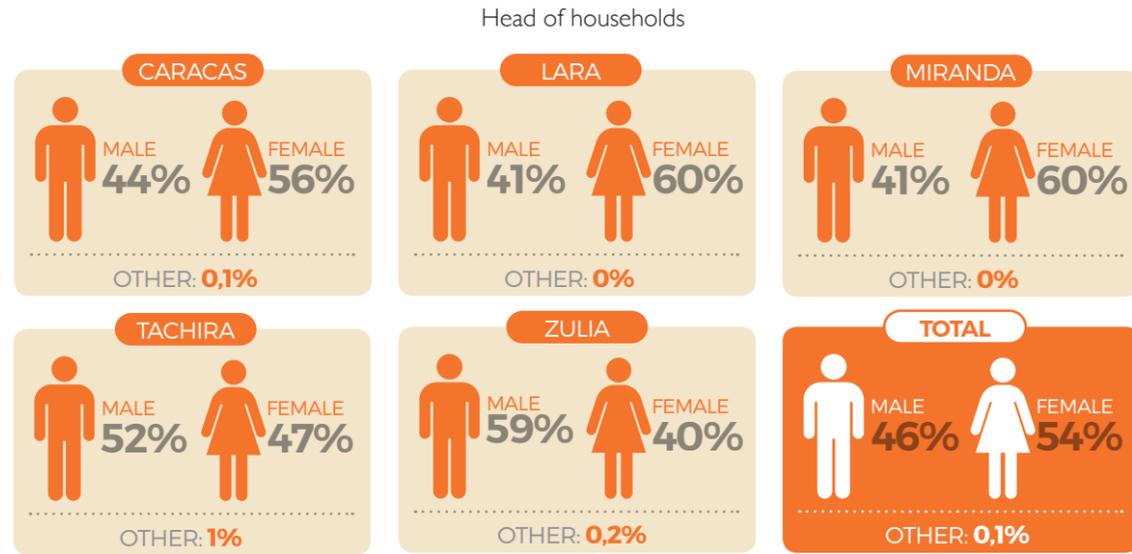
Alberto Guin, World Vision Venezuela Response Office

## 5.1 Demographic profile

Overall, approximately 77 per cent of the surveyed population were women. Among key informants, 60 per cent of the sample were female (KII). The high participation of women is explained by the fact that 54 per cent of the surveyed households are female-headed. The communities in Jáuregui (Tachira) and Ambrosio (Zulia) have the lowest percentages of women population, with 38 per cent and 35 percent, respectively. According to latest available data from the National Census 2011, in the twelve municipalities selected for this assessment, on average, 38 per cent of households were led by women. The increase in the number of women as household head could be explained by migration patterns of Venezuelans; however, there is no available information to confirm this hypothesis.

Figure 1: Population surveyed and head of households, by gender



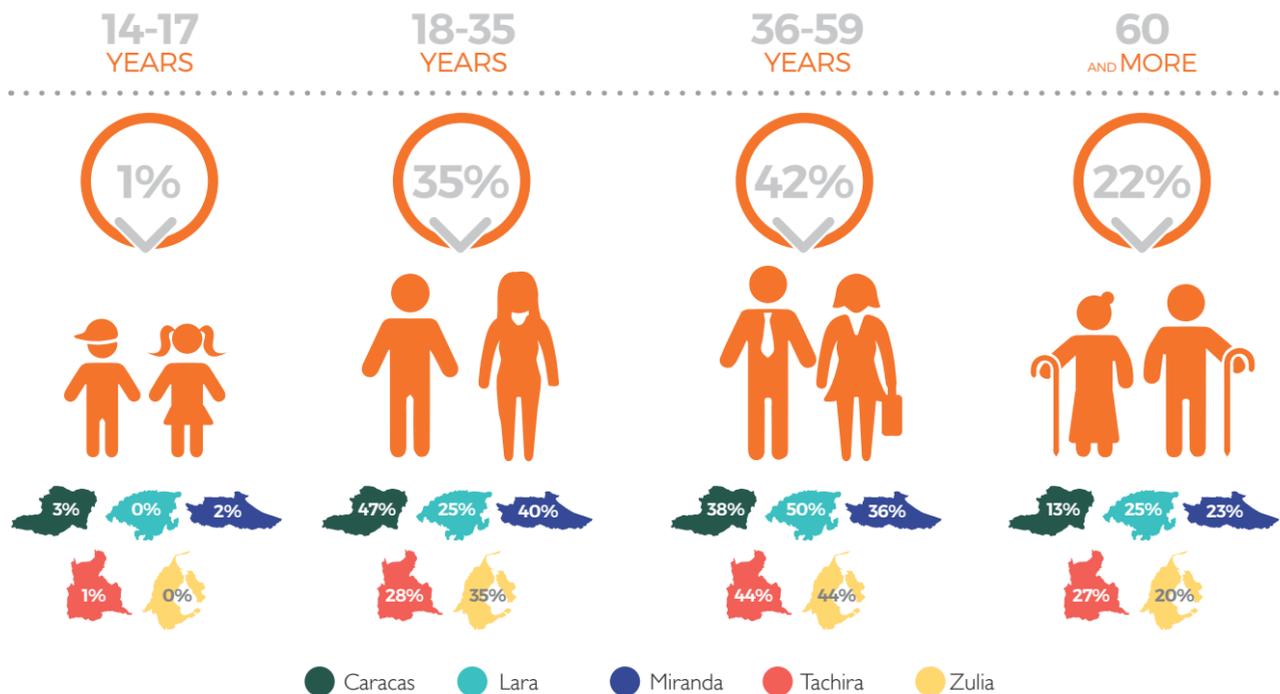


Source: HH survey

Analysis of the respondents age suggests a concentration in the 36-59 age group (42 per cent overall), a trend that is consistent in all three rural states (Lara, Tachira, Zulia), followed by the 18-35 age group (35 per cent) which is higher in urban states of Caracas

and Miranda. The elderly or age range between 60 and above constitute 22 per cent of the surveyed respondents. Therefore, it can be mentioned that the profile of the people participating in this rapid assessment were young adults.

Figure 2: Distribution of responded by age groups and State



Source: HH survey.

Breakdown of average age of respondents can be seen in the table below with 44 years as overall age average. By geographical area of residence, it is possible to observe a lower average age in urban areas than in rural areas. At the state level, Caracas has the lowest average age of 38.8 years while State of Lara is the one that shows the highest value with an average age close to 47 years old.

Finally, according to the size of the household, a clear downward trend is observed in the average age levels as the size of the household increases, since in bigger household the number of younger members increase. Single person households have an average age of nearly 60 years, these households are mainly formed by older adults living alone; and with the lowest level of 39.5 years in households with nine members or more. Thus, there is an average difference of 20 years between the two (see table 3).

Table 3: Average respondent age by socioeconomic variables.

	Average
<b>Overall</b>	43.8
<b>By zone of residence</b>	
Urban	42.9
Peri-Urban	45.1
Rural	47.1
<b>By State</b>	
Caracas	38.8
Lara	46.9
Miranda	42.4
Tachira	47.5
Zulia	44.7
<b>By Household size</b>	
One-headed household	59.6
Between 2 to 4 members	45.1
Between 5 to 8 members	41.4
9 members and more	39.5

Source: HH survey.

### Household composition

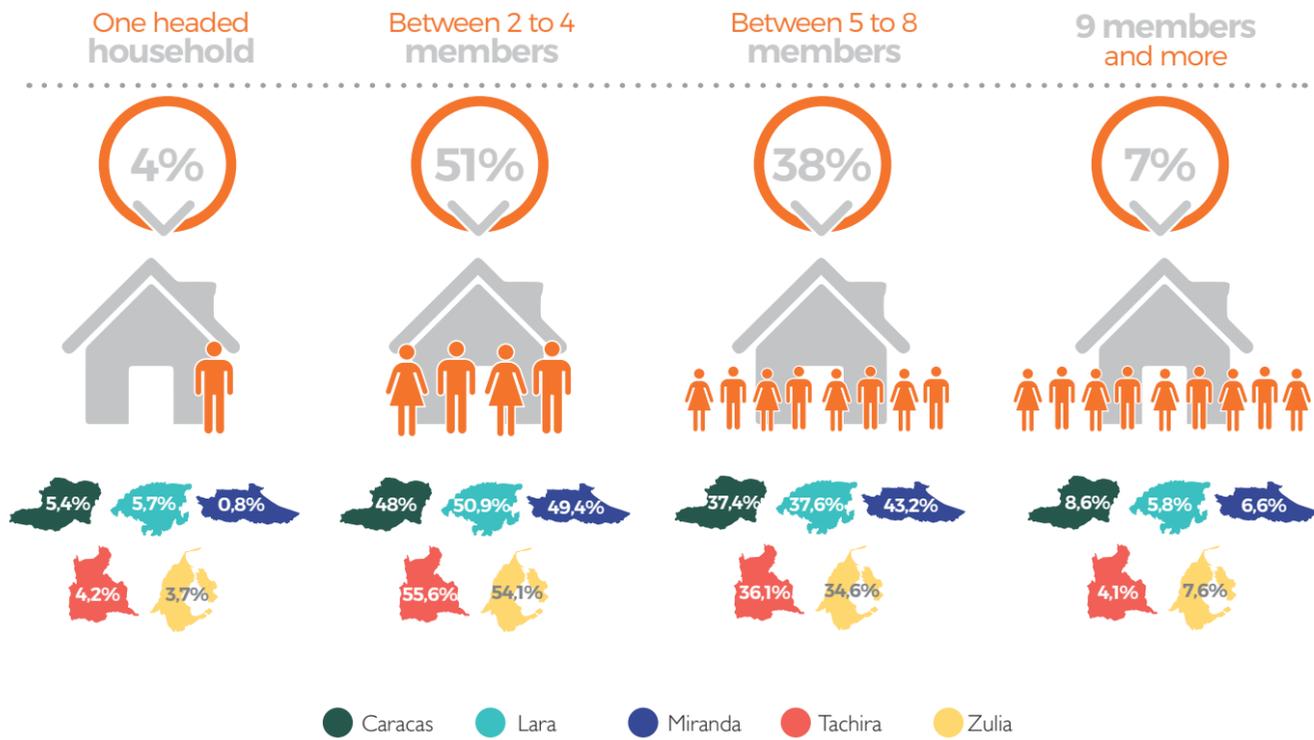
In terms of household composition, half of the households in the twelve selected communities have between of 2-4 members with 38 per cent between 5 and 8 members overall. It is important to mention that it was possible to observe households of more than 9 persons, in some cases with reports of more than 20 members living in the same house. These cases represent 7 per cent of the total households surveyed. Caracas and Zulia are the States with the highest number of cases of households with this type of composition, with 9 per cent and 8 per cent, respectively (see Figure 3).

It is important to mention the existence of single-headed households which represent 4 per cent of the total sample, Lara stands out as the State with the highest participation of this type of households with 5.7 per cent.



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Figure 3: Household size by categories by State.



Source: HH survey.

The average household size in the communities of the selected States is 4.7 members, which can be rounded up to five members per household. It is important to analyze the differences in this indicator by various socio-demographic variables. By area of residence, it can be seen that urban areas have a larger average household size compared to peri-urban and rural areas with 4.8 members per household though not significantly, which reinforces what was mentioned above about the internal migratory flows in Venezuela, especially to urban areas.

At the state level, Miranda (4.9) and Caracas (4.8) have the largest average household sizes, and Táchira the smallest with 4.3 members per household. By municipality, Jáuregui, Táchira has the smallest average household size, with 3.9 while Sucre, Miranda and San Francisco, Zulia with an average value above 5 members (see table 4).



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Table 4: Household size by socioeconomic variables.

	Average
<b>Overall</b>	4.7
<b>By zone of residence</b>	
Urban	4.8
Peri-Urban	4.5
Rural	4.5
<b>By State</b>	
Caracas	4.8
Lara	4.6
Miranda	4.9
Tachira	4.3
Zulia	4.7

	Average
<b>By Municipality</b>	
Libertador	4.8
Iribarren	4.5
Palavecino	4.5
Torres	4.8
Guaicaipuro	4.4
Sucre	5.2
Jáuregui	3.9
Junín	4.3
San Cristóbal	4.5
Cabimas	4.3
Maracaibo	4.6
San Francisco	5.1

Source: HH survey

Comparing the data from Population Census 2011 and the household survey (see table 5) as seen in the table below, it is interesting to note a significant increase in the average number of people living by house in the communities selected specially in Altigracia, Lara

(65 per cent) and Petare, Miranda (48 per cent). In general and overall, this indicator increased by 21 per cent in comparison to 2011 data. The communities with lowest increase are Jauregui, Tachira (2 per cent) and Ambrosio and Cristo Aranza, Zulia (5 per cent each).

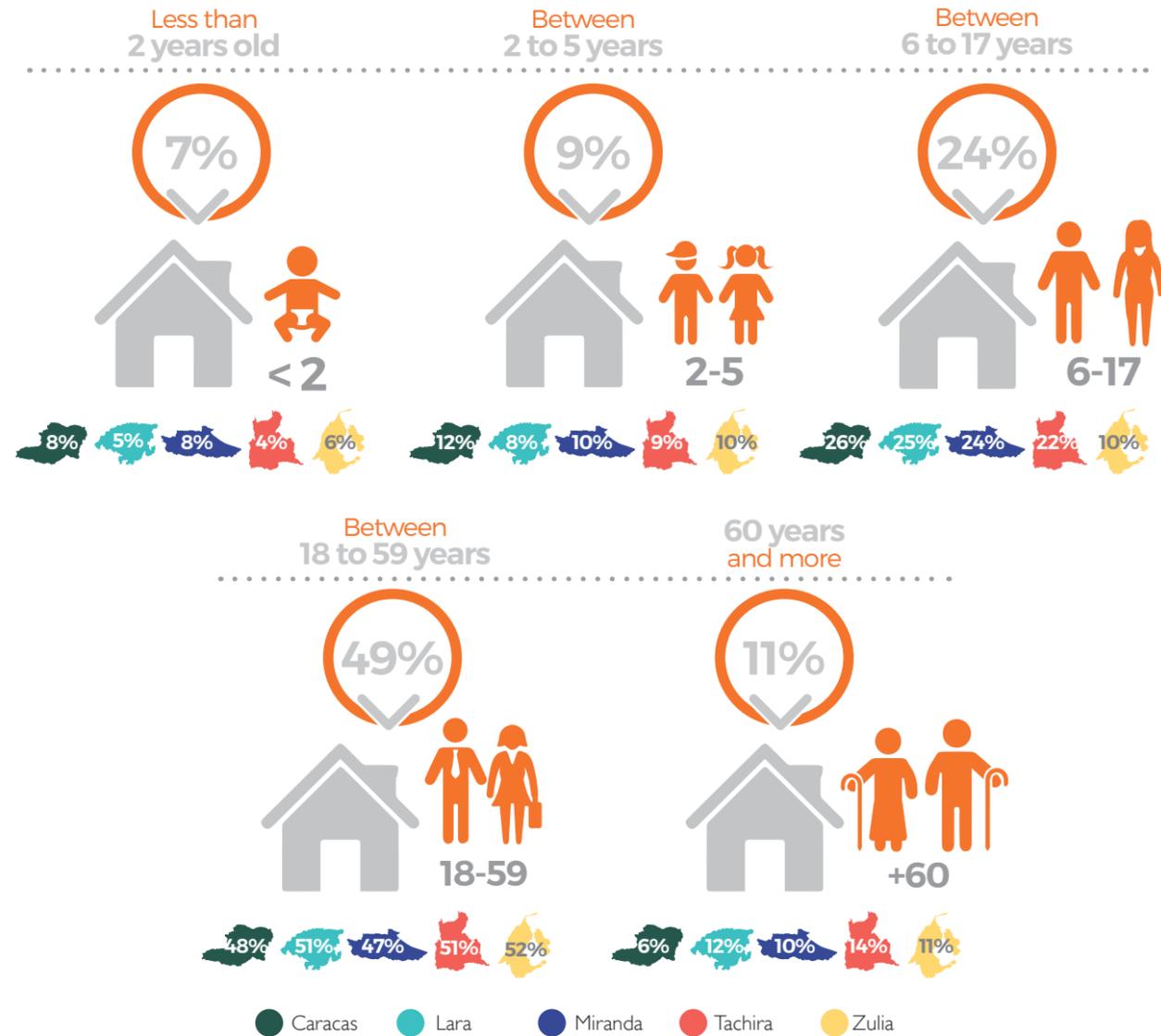
Table 5: Average number of people by house by state.

State	Municipality	Community	Average number of people by house by state	Average number of people by house by state - HH survey	% change by state	Average number of people by house by community	Average number of people by house by community - HH survey	% change by Community
Distrito Capital	Libertador	Sucre	3.5	4.8	36%	3.6	4.8	34%
	Iribarren	Juan de Villegas				4.1	4.5	11%
Lara	Palavecino	José Gregorio Bastidas	4.0	4.6	15%	3.6	4.5	26%
	Torres	Altigracia				2.9	4.8	65%
	Guaicaipuro	Los Teques				3.7	4.4	20%
Miranda	Sucre	Petare	3.6	4.9	36%	3.5	5.2	48%
	Jáuregui	Jáuregui				3.8	3.9	2%
Táchira	Junín	Junín	3.8	4.3	13%	3.8	4.3	15%
	San Cristóbal	La Concordia				3.8	4.5	19%
Zulia	Cabimas	Ambrosio				4.1	4.3	5%
	Maracaibo	Cristo de Aranza	4.1	4.7	15%	4.4	4.6	5%
	San Francisco	San Francisco				4.2	5.1	20%
National			3.9	4.7	21%	3.9	4.7	21%

Source: Census 2011 and household survey.

The age distribution of the household members shows that about 50 per cent of the members of the household are between 18 and 59 years old, 40 per cent are minors mostly between 6 and 17 years old, and the remaining 10 per cent are member over 60 years old. This trend can be observed in all the States and communities studied (see Figure 4).

Figure 4: Distribution of household members by age groups: total and by State.

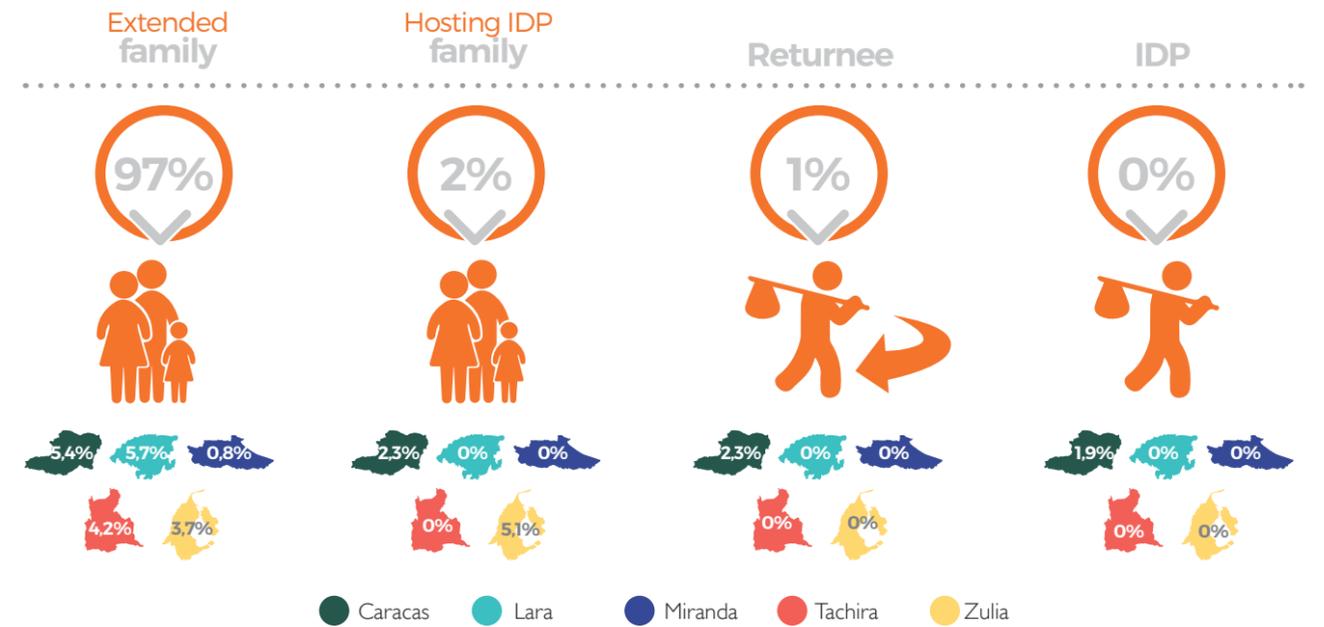


Source: Household survey.

About the types of households observed in the communities, 9 out of 10 households report being extended families. Regarding if the household hosting migrants (internal or external), only 7 per cent report to be a host household. Zulia is the state with the highest number of households hosting IDP people with 5.1 per cent, following by Caracas

2.3 per cent and Miranda 1.6 per cent. It is important to mention also that Caracas report the highest percentage of returnees with 2.3 per cent and IDP with 1.9 per cent which coincides with the reports of key informants, who also mentioned about internally displaced persons and returnees in the community (see Figure 5).

Figure 5: Household members total and by State.

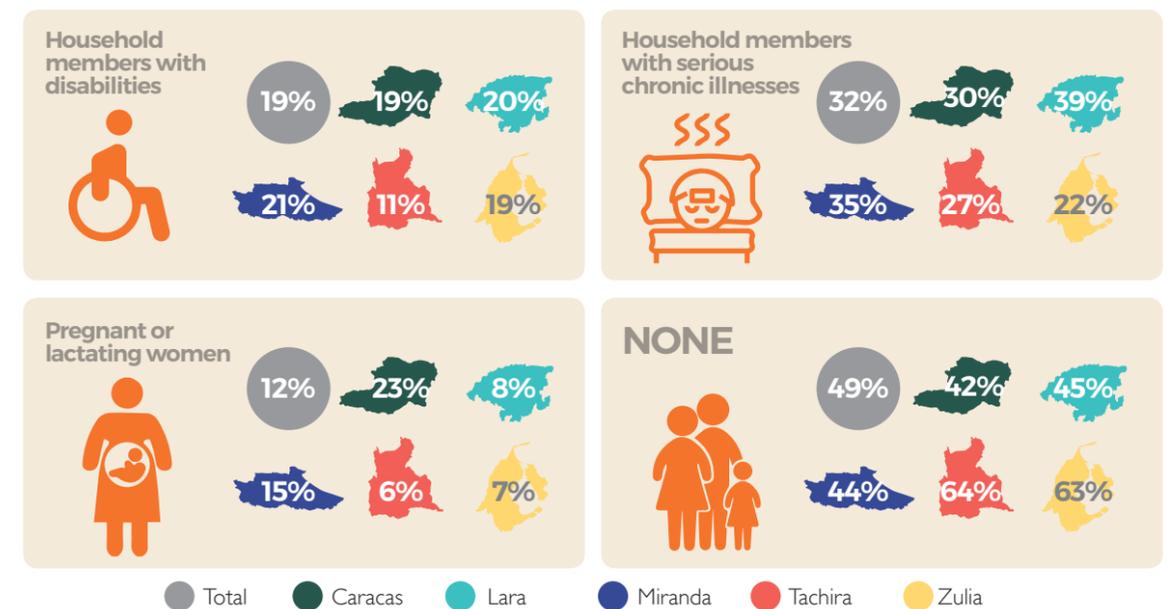


Source: Household survey.

Additionally, it is estimated that 3 out of 10 households have members who suffer from chronic diseases, among the most common being: diabetes, hypertension, asthma and heart disease, among others. This data is important as it gives an estimate of the number of people at the community level in

need of medical care and access to medicines on a regular basis should the response consider this as one of the interventions moving forward. On the other hand, 19 per cent of the households have members with some physical limitation and 12 per cent have pregnant women in the family (see Figure 6).

Figure 6: Population groups represented in the household: total and by State

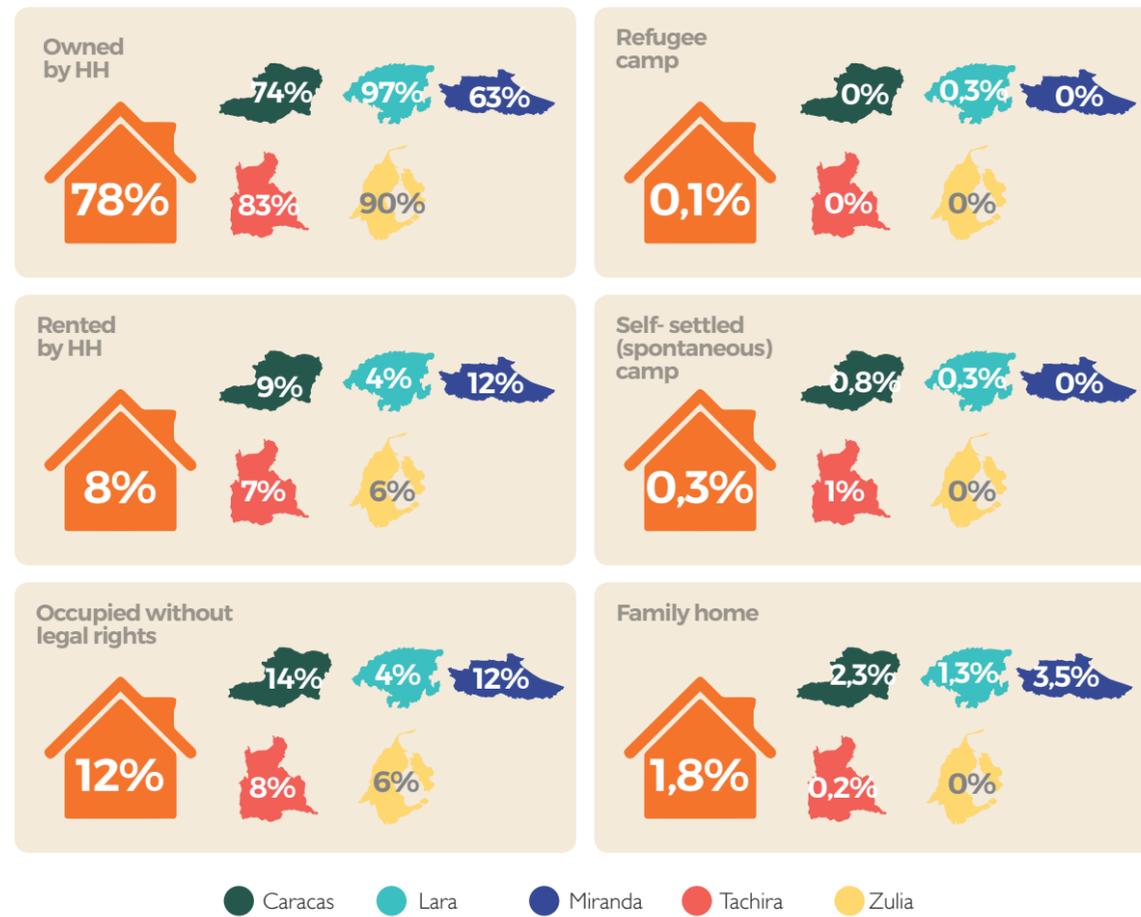


Source: Household survey.

Finally, with respect to the condition of home ownership, it can be observed that 78 per cent of households own the home in which they live. Eight per cent live in a rental shelter. However, it can be seen that 12 per cent of households occupy places over which they have no legal rights. At the state level, the case of Miranda stands out, where 21.4 per cent of households report living in this type of occupation, followed by Caracas with 14.8 per

cent (see Figure 7). This result is key to take into account, since according to key informants from the states of Caracas, Lara, Táchira and Zulia mention the existence of households in their communities at risk of being removed of their homes in the next six (6) months. The key informants from the state of Miranda do not mention the existence of households in their communities in this situation despite the results obtained through the household survey.

Figure 7: Household ownership: total and by State



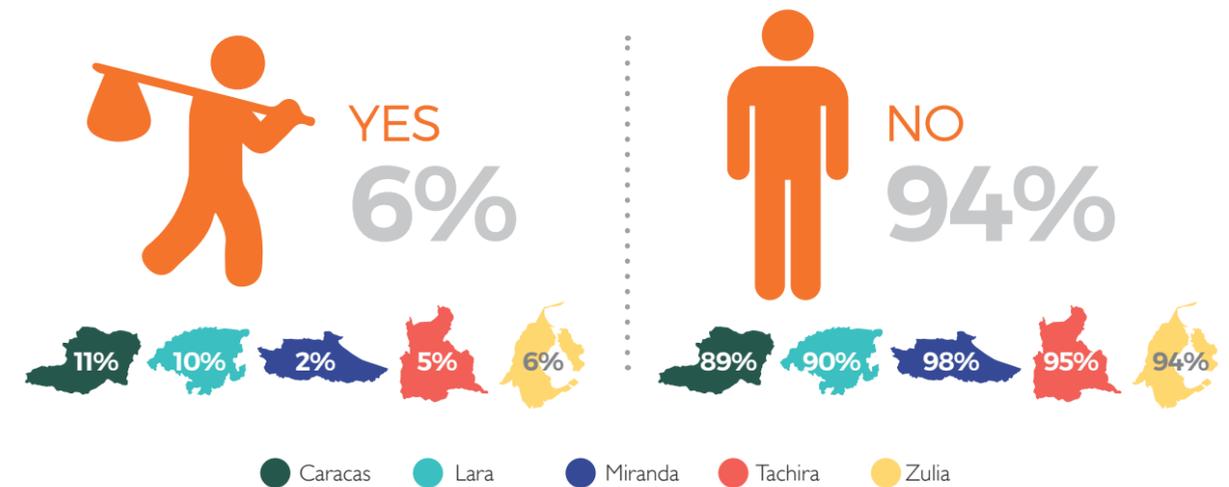
Source: Household survey.

**Population Movement**

Ninety-four percent of households surveyed report no plans to move, a trend that is consistent cross the states. The 6 per cent considering moving to another location expressed they wanted to move to

Colombia, to migrate to another state or to move out to a different community within their current state. The reasons behind it are: to look for a job (37 per cent), to access better services (32 per cent) and to acquire food (27 per cent). By state the highest percentage are in Caracas and Lara (see Figure 8).

Figure 8: People considering moving to another location: total and by State

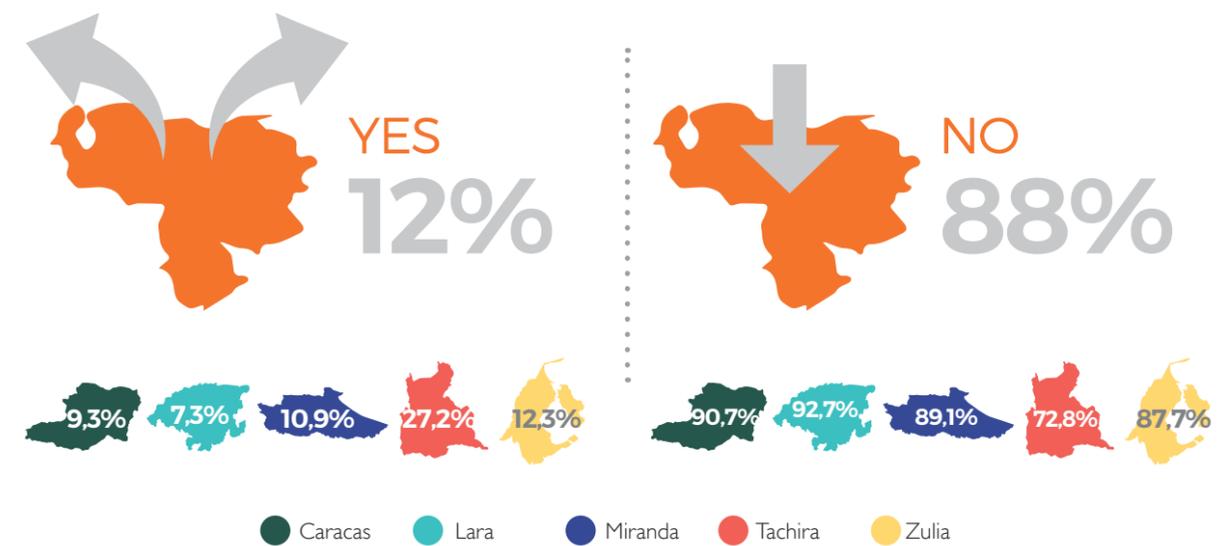


Source: Household survey.

An estimated 1 in 10 household travel often to other countries, mainly Colombia (88 per cent). The main reason are: to acquire food (62 per cent), to acquire medicines (28 per cent), to look for a job (29 per

cent) and to visit relatives and friend (24 per cent). The states where people travel more to other countries are those near to the border with Colombia: Tachira (27 per cent) and Zulia (12 per cent) (see Figure 9).

Figure 9: People often traveling to other countries: total and by State



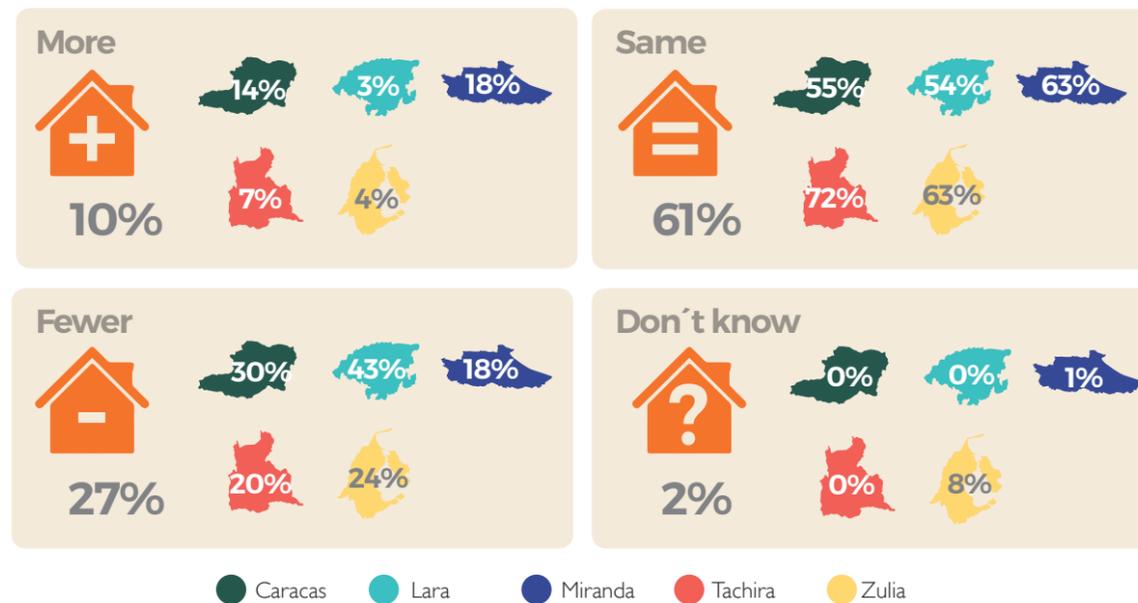
Source: Household survey.

The current national crisis has had an impact at the community level, with 27 per cent of the people consulted report that households have fewer members, the vast majority of whom have migrated to countries in the region, mainly Colombia, as well as to other European countries. This pattern is also explained by internal migratory flows, and also by the deaths of its members. At the State level, the case of Lara stands out, where 43 per cent mention that the number of household members has decreased since the crisis, followed by Caracas with 30 per cent. This is supported by key informants who in all states identified as relevant changes in the last 90 days a significant number of members leaving the community. On the other hand, 10 per cent of households mentioned that the number of household members have increased since the crisis, mainly because of newborn member, and internal/ external migration from relatives and friends. The states with the highest results are Miranda (18 per cent) and Caracas (15 per cent), which are part of the metropolitan area and capital of Venezuela (see Figure 10).

According to key informants, the main reasons people come to the communities are to find work, family reunification and access to public services. In the case of the States of Lara and Miranda, it is mentioned that this migratory flow is also motivated by the presence of conflicts in their communities, mainly related to the presence of criminal groups.

During 2018, Venezuela reported a total 32,000 internally displaced showing a 1,423.8 per cent of increased compared with 2017 data.<sup>14</sup> There is no official data regarding the reasons behind this internal migration flow and their variance, but it is widely known among the local and international organizations that people moved to Border States and the capital district to access better services, family reunification and looking for better-paid jobs. Until now there is no official data regarding change in the population levels in the major cities of these states.

Figure 10: Changes in household size since the crisis: total and by State



Source: Household survey.

14 World Bank Database. <https://data.worldbank.org/indicator/VC.IDRNWDS?locations=VE>

## 5.2 Priority problems and solutions identified

The household questionnaire includes a section to understand top problems households are facing and perceived solutions to the issues identified. The most frequent problems are identified by counting the number of times they were mentioned.

Overall, the top three problems identified are regarding the access to water (22.4 per cent), followed by access to food (22 per cent) with only a little difference as can be seen in the table below and the conditions of roads and general infrastructure in the communities (18 per cent)<sup>15</sup>.



Mishelle Michelle, World Vision LAC

Figure 11: Most frequent problems identified.



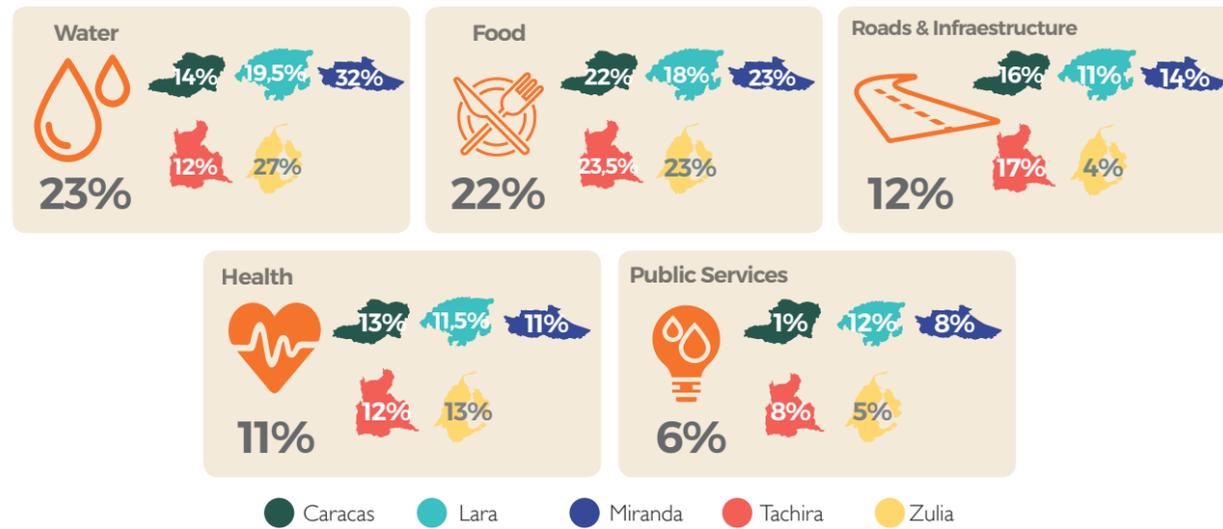
Source: Household survey.

The first five problems account for 73 per cent of the total responses. With the exception of Lara (public services) and Zulia (health), where problems arise that are not at the top of the national scale. The least

frequently mentioned problems are Livelihoods (4.3 per cent), Children (1.9 per cent), Housing (1.7 per cent), Population movements (0.9 per cent), and mental health (0.4 per cent).

15 The category of "Public Services" did not exist in the list of problems suggested in the survey; it was identified under the comments section. Therefore, it is not possible to present specific solutions to this problem, beyond giving some light in the different sections of the report on the restrictions of access that the population of the communities has to the services.

Figure 12: Top 5 most frequent problems identified. Total and by state.



Source: Household survey.

In the texts below, more information is provided on the problems identified, giving information on their causes and possible solutions as expressed by the communities themselves.

### 5.2.1 Water

#### The Problem

Water received a quarter of the total responses, and is also the most frequent problem reported by respondents in Miranda (31.3 per cent), Zulia (26.7 per cent) and Lara (19.8 per cent) In the states of Táchira (12.4 per cent) and Caracas (13.8 per cent), water was the third most frequent problem before Roads and Infrastructure.

The three main causes of water problems in the selected communities are the insufficient supply of the service for all household needs (88 per cent), the high cost of the service (36.7 per cent) and the non-potability of water as well as the contamination of its sources (25.3 per cent). These are consistent in all the states analyzed, except for the case of Táchira in which as second they identify is that it takes a long time to collect (39.1 per cent) – see table 6. This results confirm with the assessment carried out by the World Food programme (2020)<sup>16</sup> reported that 59 per cent of households experience irregular service of water

and 25 per cent did not have access to a permanent water source. It is estimated that around 2 million of people did not have access to water services in the last month. The decrease of the supply of water is linked with the electricity shortages.

According to the information collected through key informants, the main sources of water in the communities are reported to include: aqueduct, the use of pumps, tanks, and bottles and bags of water purchased in the store. The cases of the communities of Los Teques and Petare from Miranda stand out, as most of them report obtaining water from rivers, rainwater and collection water in other communities because the water service does not work in both communities.

Alberto Gullin, World Vision Venezuela Response Office



16 Íbid 10.

Table 6: Top 3 causes to Water problem. Total and by state.

	Total	Caracas	Lara	Miranda	Tachira	Zulia
Insufficient for all household needs (cooking, washing, cleaning)	88.0%	91.1%	83.5%	99.0%	93.1%	70.1%
Too expensive	36.7%	13.3%	37.4%	22.4%	2.6%	82.1%
Water contaminated/not potable for drinking	25.3%	33.3%	12.6%	15.1%	8.5%	57.0%

Source: Household survey.

The above context is aggravated when 7 out of 10 household report that their access to tanks or other containers for water storage is either non-existent (45 per cent) or partial (30 per cent). At the state level, Miranda has 61 per cent of its households without the necessary access to this item. Majority (70 per cent) have access to buckets, which according to key informants, with the exception of Táchira and Zulia, there is a good supply of this product in the markets despite the fact that its price has increased. Therefore, even if households manage to access a water source, they do not have the means to store it in the most appropriate way.

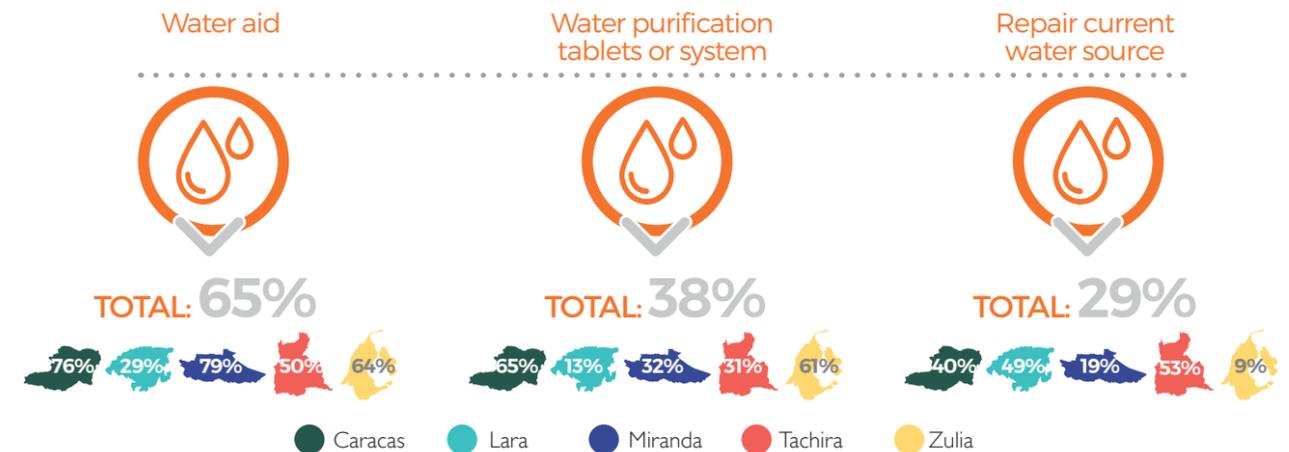
According to Rottier & Ince (2003) and Kroeger & Other (2008), the lack of access to secure water have a multiple effect in the households with impact in the use of time and resources, increase the risk to contract diseases specially diarrhea and vector transmitted diseases since the household increase

water storage in containers, and also can promote work and school absenteeism.

#### The Solution

The three main solutions proposed by the communities to address the problems identified are to provide assistance to improve access to water, to deliver aquatabs or water purification systems and to repair the community's water supply (see Figure 13). As mentioned above, the provision of tools for adequate water storage can play a crucial role in communities to ensure access to quality water in households. It is important to mention that for Lara the solutions of providing water aid and water purification tablets are not priorities but to repair current water source at community level. For Zulia, the results suggest less focus on the repair of current water source at the community but in delivering water aid and water purification tablets.

Figure 13: Top 3 solutions to water problem. Total and by state.



Source: Household survey.

While the issue of sanitation is not widely mentioned by households as one of the most important problems, its intrinsic relationship with access to water makes it necessary to provide basic information on access to sanitation in the communities analyzed. According to key informants, the main sanitation structure present in the households are the family bathrooms, however, the case of the communities of Lara stands out where it is mentioned that people use bushes and fields, as well as the communities of San Francisco, Zulia and Los Teques, Miranda.

Regarding access to household cleaning products and personal hygiene products, in general terms there is a good offer of these products in the local markets, however, their price has increased. Regarding

personal hygiene products, on average 5 out of 10 households report that their need for these goods is being partially covered. It is important to take into account the case of Miranda where a quarter of the households report no access to these goods.

### 5.2.2 Food

#### The Problem

The second most pressing problem identified is food, with three main causes identified: high food prices (88.3 per cent), people are hungry (70.2 per cent), and insufficient food distribution (37.5 per cent). The latter understood in terms of food supply reaching the communities through traditional production chains (see table 7).

Table 7: Top 3 causes to Food problem. Total and by state.

	Total	Caracas	Lara	Miranda	Tachira	Zulia
Food too expensive	88.3%	85.5%	87.4%	89.3%	94.3%	86.4%
People are hungry	70.2%	77.2%	58.3%	73.6%	71.4%	70.5%
Insufficient Food availability	37.5%	51.7%	25.0%	44.3%	39.0%	27.2%

Source: Household survey

In the selected communities, according to key informants, there is food supply but with certain shortages in some items. The case of the communities of Táchira stands out where they unanimously declare that there is a shortage of food. This situation of access to food is aggravated by the fact that the prices of products have increased, in a context of constant loss of purchasing power due to the local currency. Food is often found in markets, local shops, street vendors and supermarkets but most people cannot afford to buy the food that is too expensive for them.

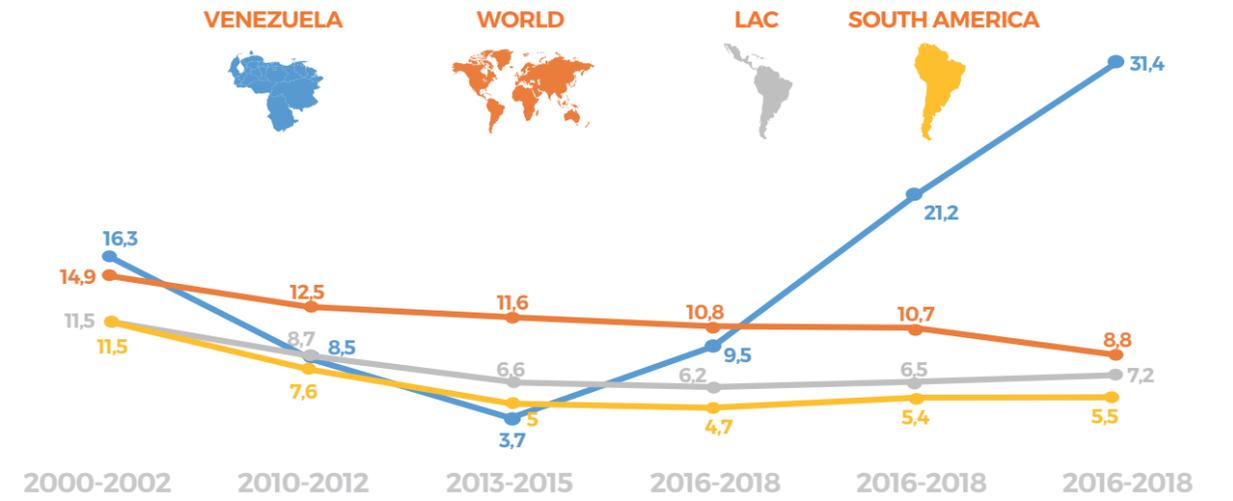
According to WFP (2020) almost 6 of every 10 household report to expend more time to get access to gas containers, and also 21 per cent mentioned that its cost is too high for the family budget. This situation is worsening the food insecurity conditions mentioned above since it may lead to the adoption of coping mechanisms that would affect their food

consumption so that they can overcome the lack of access to cooking fuel.

In the study conducted by FAO, WFP, PAHO and UNICEF, it is reported that during the period 2013-2018, 5 out of 28 countries in the Latin American and Caribbean region reported an increase in the prevalence of malnutrition: Venezuela, Panama, St Vincent and the Grenadines, Argentina and Peru. Venezuela triple the prevalence of malnutrition among its population increasing from 9.5 per cent in 2013-2015 to 31.4 per cent in 2017-2019 representing 9.1 million people facing this condition (2.9 million in 2013-2015, 6.8 million people in 2016-2018). These results are three the global average (8.8 per cent) and almost four times higher of regional level (7.2 per cent). Venezuela is the second country in the LAC region with the highest prevalence of malnutrition and nine worldwide.

17 FAO, WFP, OPS, UNICEF (2019). The State of Food Security and Nutrition in the World, 2019 and 2020.

Figure 14: Prevalence of malnutrition in Venezuelan population, 2000-2019.



Source: FAO, WFP, OPS, UNICEF (2019). Panorama de Seguridad Alimentaria y Nutricional 2019

Further, in 2019, 9.3 million people were acutely food insecure due to their lack of access to sufficient quality food<sup>18</sup>. According to the World Food Program (2020)<sup>19</sup>, an average of 30 per cent of Venezuelans have food insecurity and need assistance, eleven states show levels higher to the national average and it is estimated that 7.9 per cent of the population (2.3 millions) are experiencing severe food insecurity and another 25 per cent (7 million) have moderate food insecurity. The states with the highest prevalence of food insecurity are: Delta Amacuro (21 per cent), Amazonas (15 per cent), Falcón (13 per cent), Zulia (11 per cent) and Bolívar (11 per cent). Even in states as Lara (18 per cent), Cojedes (19 per cent) y Mérida (23 per cent) with the lowest levels of food insecurity, it is estimated that 25 per cent of households are experience some level of food insecurity.

The prevalence of food insecurity explains why 1 out of 4 children in Venezuela are underweight (IDB, 2018). It is estimated that 30 per cent of children under 5 and 23.9 per cent of women of childbearing age are anemic. Additionally the situation is exacerbated by the loss of purchasing power which means that the minimum wage is not sufficient to cover less than 5 per cent of the basic food basket<sup>20</sup>.

These realities have led to 74 per cent of households reported the adoption of coping mechanisms to deal with food insecurity (e.g. eating lower quantities of food (60 per cent), use savings to buy food (60 per cent), working for food (33 per cent) and sell assets to buy food (20 per cent), among others), according to WFP assessment report.

#### The Solution

With regard to the solutions suggested by the communities to this problem, the distribution of food (76.3 per cent), the provision of special nutrition to children and mothers (66 per cent), and the delivery of prepared meals (54.3 per cent), the latter referring to aid delivered through community canteens, stand out. These solutions are consistent across States.

The identification of these top solutions by the household members interviewed, may be suggesting a dependence on food aid in the communities. World Vision will take into account the proposed solutions while also looking for other sustainable solutions such as the promotion of small-scale food production and livelihoods restoration rather than only food distributions.

18 Global Network against Food Crisis and Food Security Information Network (FSIN). Global Report on Food Crisis 2020. Available at: <https://r4v.info/es/documents/download/75642>

19 Ibid 10.

20 Idem 16.

Figure 15: Top 3 solutions to food problem. Total and by state.



Source: Household survey

According to key informants, the communities of Miranda and Zulia are the closest to markets at an average distance of 2 and 4 kilometers, respectively. In the case of the community of Caracas, they report being 38 kilometers away from the nearest market, and in the case of Táchira, the communities are an average of 50 kilometers away. This data is relevant to measure the distance households need to cover to access the nearest market to not only obtain food and other basic goods, but also to promote and obtain clients for their daily jobs, do trades and commerce.

The cost of transportation varies depending on the State, according to key key informants, in Caracas it

costs an average of 3 dollars to go to the market; Miranda is 8 dollars, Lara 2 dollars, and Tachira 5 dollars. The case of Zulia stands out, where the average cost of transport in the communities analyzed is 38 dollars, despite its geographical proximity to the markets.

### 5.2.3 Roads and Infrastructure

#### The Problem

The third most common problem identified in the communities is the existence of damaged, flooded or destroyed roads (78.2 per cent), lack of electricity (42.7 per cent), and telephone lines and other communications cut off (40 per cent) – see table 8.

Table 8: Top 3 causes to Roads & Infrastructure problem. Total and by state.

	Total	Caracas	Lara	Miranda	Tachira	Zulia
Roads damaged, flooded, destroyed	78.2%	95.2%	63.7%	96.8%	45.1%	76.2%
Lack of electricity	42.7%	21.4%	60.0%	25.8%	73.8%	48.5%
Phone lines and other communications cut off	40.3%	36.9%	56.4%	41.9%	24.7%	37.2%

Source: Household survey

In general, Venezuelans faced difficulties to access services of quality because electricity shortages, fuel scarcity, low supply of public transportation, and the conditions of the roads that limited the mobility inside the country.

The last have an important impact in the supply chain of foods and another assets to the markets, especially in rural areas where difficulties in transport and vehicle maintenance make it difficult to supply markets<sup>21</sup>.

21 The Cash Learning Partnership - CaLP (2019). CaLP Venezuela Scoping Mission Findings. Available at: [https://www.calpnetwork.org/wp-content/uploads/2020/03/200317-CaLP-Venezuela-Mission-Findings\\_FINAL\\_EN.pdf](https://www.calpnetwork.org/wp-content/uploads/2020/03/200317-CaLP-Venezuela-Mission-Findings_FINAL_EN.pdf)

Regarding access to electricity service, it is mentioned that it is only partially supplied in the selected communities from Lara, Táchira and Zulia, and it is estimated that on average the communities do not have the service for about 6 hours per day. The case of the community of La Concordia, in San Cristóbal, Táchira, where they report not having electricity for about 10 hours a day, stands out. Followed by Juan de Villegas, Iribarren, Lara with an average of 8 hours without service.

During first half of 2019, Venezuela experienced a national power failure that affected 11 states. According to the WFP (2020), in average 40 per cent of households reported having daily interruption in the electricity services representing a total of 15 days by month with interruptions in the service. The most affected states are: Zulia, Táchira y Apure.

Finally, please refer section on digital literacy for more information regarding the challenges faced by the household to ensure connectivity to mobile network. A total of 66 per cent household report as the main challenge for a proper use of the cellphone the lack of coverage to connection network, and 50 per cent mentioned the quality of the connection once they obtained it.

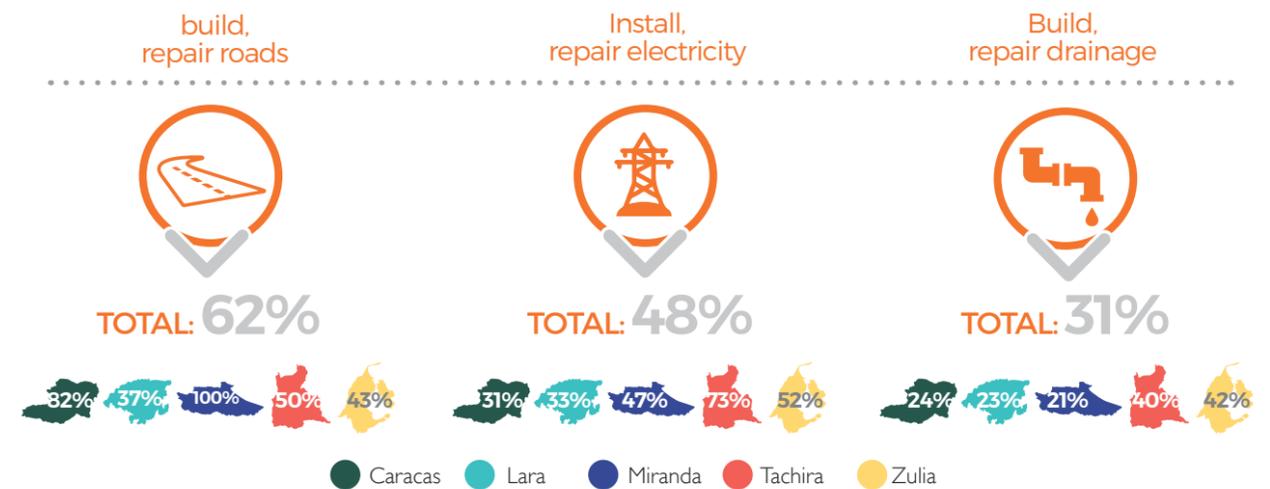


Mishelle Mitchell, World Vision LAC

#### The Solution

Among the main solutions that communities propose to this problem are the construction and repair of roads, repair or installation of electrical service, and the construction or repair of drainage.

Figure 16: Top 3 solutions to Road & Infrastructure problem. Total and by state.



Source: Household survey

To address this problem, access to construction materials is crucial. According to reports from key informants, there is a general shortage of construction materials in the selected states, and only at the level

of Caracas is there a sufficient supply of this type of goods. Prices, like other products, have increased, and locally they are usually available in local shops, markets, supermarkets and street vendors.

## 5.2.4 Health

### The Problem

With regards to health, the main causes associated with the deficiencies that the community perceives

Table 9: Top 3 causes to Health problem. Total and by state.

	Total	Caracas	Lara	Miranda	Tachira	Zulia
Insufficient medicines	69.7%	73.3%	55.6%	75.7%	82.1%	71.5%
Increasing illness (fever, cough, flu, headache, infections, etc.)	59.8%	74.4%	60.7%	62.2%	58.6%	45.0%
Insufficient qualified medical staff	52.5%	51.2%	36.1%	75.7%	55.6%	54.7%

Source: Household survey

The lack of medicines reported in the communities it is important to have into account since 3 out of 10 households have members with critical health conditions that demand constant medical attention

as well as the supply of medicines. The mortality rate of non-transmissible diseases in 2016 was of 473.8 per 100,000 inhabitants. Most of the deaths were because of heart diseases (126.1 per 100,000), cerebrovascular diseases (53 per 100,000) and diabetes (57.3 per 100,000)<sup>22</sup>. According official reports, during 2019 there were a total of 90,000 deaths because of non-transmissible diseases with difficulties for diagnostic and treatment.

Regarding the increase of illnesses among community members, humanitarian organizations report in the last years the re-emergence of previously

are the lack of medicines (69.7 per cent), the increase of illnesses among community members (59.8 per cent), and insufficient numbers of qualified medical staff (52.5 per cent) (see table 9).

controlled diseases such as malaria, measles, diphtheria, yellow fever, tuberculosis and HIV. During 2018, a total of 404,924 cases of malaria were recorded. In 2019 until October a total of 323,392 malaria cases were identified, showing a slight decrease of 1.5 per cent compared with the same period in 2018. The states that show an increase of cases were Anzoátegui (54.3 per cent), Delta Amacuro (64.2 per cent), Mérida (89.7 per cent), and Monagas (40.5 per cent)<sup>23</sup>.

During the measles outbreak from 2017 to 2019, a total of 7,054 cases were confirmed with an average incidence of 22.2 cases per 100,000 population. The highest incidence rates were reported in Delta Amacuro (215 cases per 100,000 population), the Capital District (127 cases per 100,000 population), and Amazonas (85 cases per 100,000 population). A total of 541 cases, 8 per cent of the total, were reported in indigenous communities from Delta Amacuro (332 cases), Amazonas (162 cases), Bolívar (14), Capital District (1), Monagas (22 cases) and Zulia (9 cases)<sup>24</sup>. The outbreak has been contained because of the efforts to increase vaccination campaigns among the most vulnerable population, as well as acquisition of medical supplied needed to carry out timely testing for the identification and treatment of suspected cases<sup>25</sup>.

The diphtheria outbreak began in July 2016 and remains ongoing, until March 2020 a total of 1,785 cases have been confirmed and a total of 292 deaths reported. In 2019, the highest age-specific case-fatality rates are among 5 to 9- year-olds (33 per cent), followed by 1-year-olds (25 per cent), and 40 to 49-year-olds (20 per cent)<sup>26</sup>.

In November 2019 a case of yellow fever was confirmed in the state of Bolívar in a man of 46 years old, being the first native case in the country since 2005. According to PAHO and WHO, Venezuela is a country of high risk for yellow fever outbreaks because the presence of vast forest areas where it is estimated almost 4.6 million of Venezuelans live. A response plan was put in place and thanks to interagency coordination a total of 571,000 vaccines were procured to be distributed among the Bolívar population in higher risk<sup>27</sup>.

Regarding tuberculosis, in the period of 2014-2018 there was an increase of 88 per cent in the confirmed cases from 6,063 cases in 2014 to 11,394<sup>28</sup> cases in 2018. Half of the cases are in Distrito Capital, and the incidence rate in 11 states are higher than the national average. The most affected population are people with HIV (58 per cent), people in jail (17 per cent) and indigenous people (5.6 per cent)<sup>29</sup>.

Finally, about population with HIV it is estimated that the infection rate increase by 26 per cent during 2010-2016, with 6500 new infections in 2016. Since 2017 there is no official data regarding HIV since there is a lack of supply of medical assets needed to do the diagnosis. The supply of medicines for the treatments is limited, especially for pregnant women and children. The shortage of medicines of 2018 affected the treatment of 84 per cent of patients registered in the public health sector.

The outbreaks can be contained with a strong vaccination plan, according to data from the Annual Plan of Immunization (PAI in Spanish) in the period of 2012-2018 the coverage of vaccination has decreased. Measles vaccination coverage dropped from 87 per cent coverage in 2012 to 74 per cent in 2018; similar trend is observed in Polio3 (73 per cent to 53 per cent), Rotavirus (76 per cent in 2012 to 18 per cent in 2017) and DTP3 (81 per cent to 60 per cent). The highest coverage rates are reported in BCG vaccines with a coverage in 2018 of 92 per cent (4 percentage less than in 2012)<sup>30</sup>. The availability of vaccines by type have improved in 2018 compared with 2017, but it is important to mention the lack of key medical supplies, such needles, to carry out vaccinations campaigns. In geographical areas of difficult access such as Delta Amacuro, the vaccines coverage can drop down to 25 per cent.

About the third cause identified, the conditions of hospitals and health centres in the selected communities, according to key informants, all communities have a health centre but in 6 out of the 9 the infrastructure has massive damage that does not make it safe to use. In the communities of Cristo de Aranza and San Francisco de Zulia the health centre is not in use. With respect to hospitals, only one is reported in four communities, with massive damage to infrastructure, lack of medical supplies and medicines, as well as a shortage of medical staff has been reported.

Venezuela's health system is still functional with a network of 292 hospital (level I and II) and 323 ambulatories, and a community health network of 17,029 clinics. Since 2016, the health facilities are facing major challenges accessing medical supplies, deterioration of infrastructure and decrease in the number of medical staff. According to Federacion

22 Ibid 21.

23 WHO/PAHO (2019). Epidemiological Update: Malaria - 18 November 2019. Available at: <https://www.paho.org/en/documents/epidemiological-update-malaria-18-november-2019>

24 WHO/PAHO (2020). Epidemiological Update: Measles - 24 January 2020. Available at: <https://www.paho.org/en/documents/epidemiological-update-measles-24-january-2020>

25 PAHO. Measles outbreak in Venezuela in under control. [https://www.paho.org/venezuela/index.php?option=com\\_content&view=article&id=544:el-brote-de-sarampion-en-venezuela-esta-bajo-control&Itemid=0](https://www.paho.org/venezuela/index.php?option=com_content&view=article&id=544:el-brote-de-sarampion-en-venezuela-esta-bajo-control&Itemid=0)

26 WHO/PAHO (2020). Epidemiological Update: Diphtheria - 3 March 2020. Available at: <https://www.paho.org/en/documents/epidemiological-update-diphtheria-3-march-2020>

27 PAHO/WHO (2019). Yellow Fever - Venezuela. Available at: <https://www.who.int/csr/don/21-november-2019-yellow-fever-venezuela/es/>

28 PAHO/WHO (2019). Global Tuberculosis report 2019. Available at: <https://apps.who.int/iris/bitstream/handle/10665/329368/9789241565714-eng.pdf?ua=1>.

29 Ibid 20.

30 PAHO/WHO (2019). Country Report abbot Annual Plan of Immunization (PAI). Available at: [https://www.paho.org/hq/index.php?option=com\\_docman&view=download&category\\_slug=perfiles-paises-im-1809&alias=4803-venezuela-perfil-pais-803&Itemid=270&lang=es](https://www.paho.org/hq/index.php?option=com_docman&view=download&category_slug=perfiles-paises-im-1809&alias=4803-venezuela-perfil-pais-803&Itemid=270&lang=es)

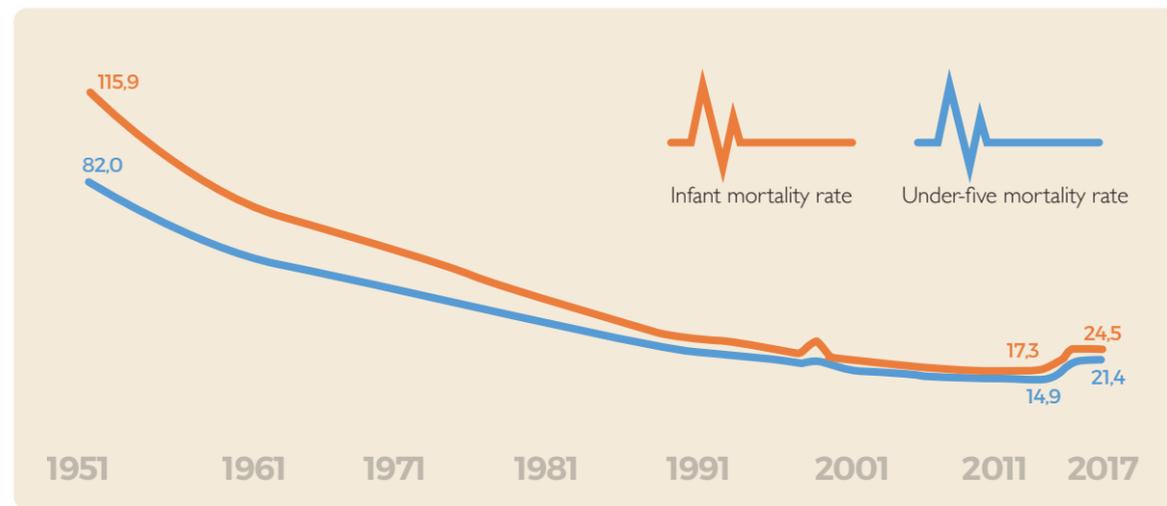


MedicaVenezolana, in 2018 a total of 22,000 doctors, between 3,000-5,000 nurses and almost 6,000 laboratory technicians fled the country looking for new job opportunities<sup>31</sup>. Data from 2017 shows that the density of health staff by 10,000 inhabitants with the following disaggregation: doctors – 17.3 slightly below the regional average of 23.1; nurses 20.1 four times lower than regional average of 60.5 number per 10,000 inhabitants; and dentist 1.4 five times under regional average of 5.7 dentist by 10,000 inhabitants.

All this three factors create more friction in the health systems combined with problems already mentions in access to water, food and proper infrastructure to access services. Until August 2019, a total of 352 maternal deaths were reported (98.87 death per 100,000 births), 17 per cent less that the same period from 2018. An average of 11 maternal deaths were reported weekly, 96.9 per cent were in-hospital deaths which is a good indicator to measure the capacities

of the health system<sup>32</sup>. It is important to mention the limited access women in Venezuela are facing to the access to sexual and reproductive health, in 2019 the fertility rate among adolescents of 15-19 years reached 85 birth per 1,000 adolescent, almost twice the regional rate of 48.3 birth per 1,000<sup>33</sup>. A higher number of pregnancies among adolescent women means an increase likelihood of complications during birth and health risk for the children, as well as the intensification of vulnerabilities faced by the mother and the child in the national context already described. Regarding child mortality rates, according to data from UNICEF (2018)<sup>34</sup> there has been an increase in the mortality rate of children under-five year and the infant mortality rate since 2014 after a constant decrease tendency since 1951. During the first semester of 2019 a total of 714,536 cases of diarrhea were registered with 171 deaths. The most affected population groups were children under one year (see Figure 17).

Figure 17: Infant and under-five mortality rates per 1000 live births. Venezuela, 1951-2018.



Source: UNICEF.

31 Organización Panamericana de la Salud. Respuesta de la OPS para mantener una agenda eficaz de cooperación técnica en Venezuela y en los estados miembros vecinos. 57.o Consejo Directivo, 71.a sesión del Comité Regional de la OMS para las Américas; del 30 de septiembre al 4 de octubre del 2019; Washington, DC. Washington, DC: OPS; 2019 (CD57/INF/7, 30 de agosto del 2019, Original: inglés). Disponible en: [https://www.paho.org/hq/index.php?option=com\\_docman&view=download&alias=50464-cd57-inf-7-s-ops-cooperacion-venezuela&category\\_slug=cd57-es&Itemid=270&lang=es](https://www.paho.org/hq/index.php?option=com_docman&view=download&alias=50464-cd57-inf-7-s-ops-cooperacion-venezuela&category_slug=cd57-es&Itemid=270&lang=es)

32 Ibid 21.

33 Organización Panamericana de la Salud. Indicadores básicos 2019: Tendencias de la salud en las Américas. Washington, D.C.: OPS; 2019. Available at [https://iris.paho.org/bitstream/handle/10665.2/51543/9789275321287\\_spa.pdf?sequence=7&isAllowed=y](https://iris.paho.org/bitstream/handle/10665.2/51543/9789275321287_spa.pdf?sequence=7&isAllowed=y)

34 UNICEF Data: Monitoring the situation of children and women. Available at: [https://data.unicef.org/resources/data\\_explorer/unicef\\_f?ag=UNICEF&df=GLOBAL\\_DATAFLOW&ver=1.0&dq=VEN.CME\\_MRY0T4.&startPeriod=1970&endPeriod=2020](https://data.unicef.org/resources/data_explorer/unicef_f?ag=UNICEF&df=GLOBAL_DATAFLOW&ver=1.0&dq=VEN.CME_MRY0T4.&startPeriod=1970&endPeriod=2020)

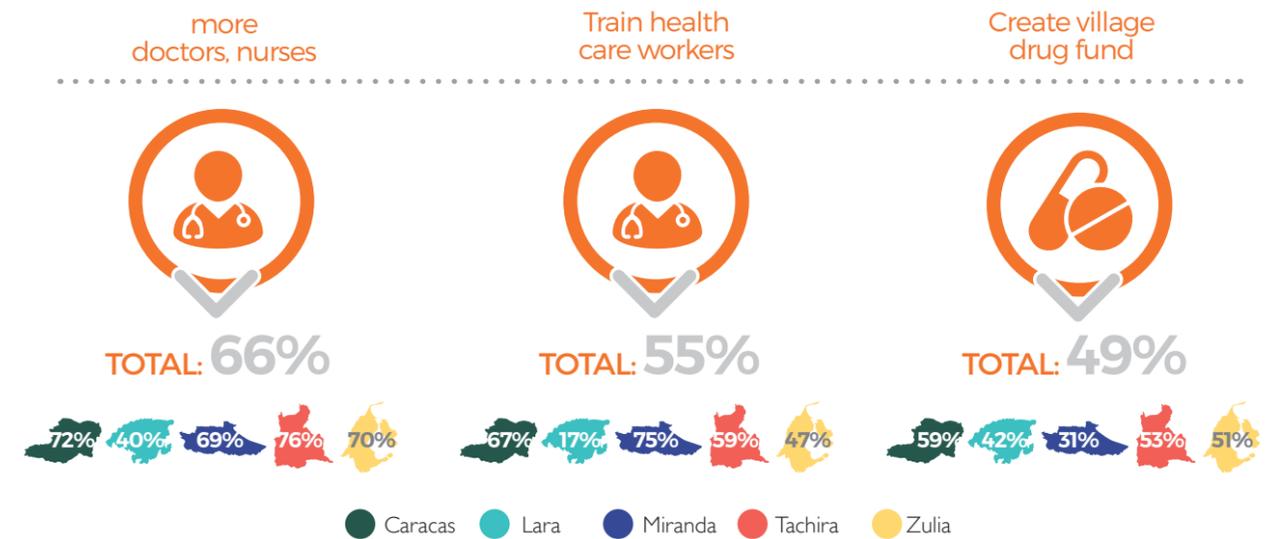
### The Solution

As a response to this reality, the main solutions offered by the communities are to guarantee a greater number of doctors and nurses to whom have access to proper training and education, as well as to create a community fund for medicines that will allow access to them to the population with the greatest need for medical treatment (see Figure 18).

In addition, it is important to note that key informants identified the occurrence of epidemics as the main

risk, disaster or calamity that can occur in the next 90 days in their communities, which is closely linked to the second cause identified in the health problems. The communities suggest providing the community with information, as well as promoting the design of a community contingency plan to deal with the epidemic. The specific actions they suggest are: fumigation, organizing clean-up campaigns, delivery of masks, adequate garbage collection, school campaigns and sensitization meetings with local authorities.

Figure 18: Top 3 solutions to Health problem. Total and by state.



Source: Household survey

### 5.2.5 Security & Protection

#### The Problem

The area of Security and Protection, the fifth most identified problem but with particular relevance given

the situation of the country. The main causes include the occurrence of robberies in the communities (90.1 per cent), home invasion (armed or forced entry) (32.8 per cent) and the existence of community conflicts (31.7 per cent) – see table 10.

Table 10: Top 3 causes to Security and Protection problem. Total and by state.

	Total	Caracas	Lara	Miranda	Tachira	Zulia
Theft	90.1%	85.5%	93.0%	100.0%	82.2%	88.4%
Home invasion (armed or forced entry)	32.8%	36.4%	32.6%	38.4%	18.0%	33.6%
Community conflicts	31.7%	40.0%	28.2%	38.4%	25.5%	20.5%

Source: Household survey

In terms of security, the household members surveyed were asked to identify the situations that are perceived to occur most frequently in the community and put the integrity of its inhabitants at risk. The three main situations mentioned coincide with those identified

as the main causes of the problem: theft (62 per cent), conflict (39 per cent), home invasion (28.3 per cent), followed by armed violence (28.1 per cent) and physical assault (20 per cent) – see Figure 19.

Figure 19: Situations experienced by people in the community.



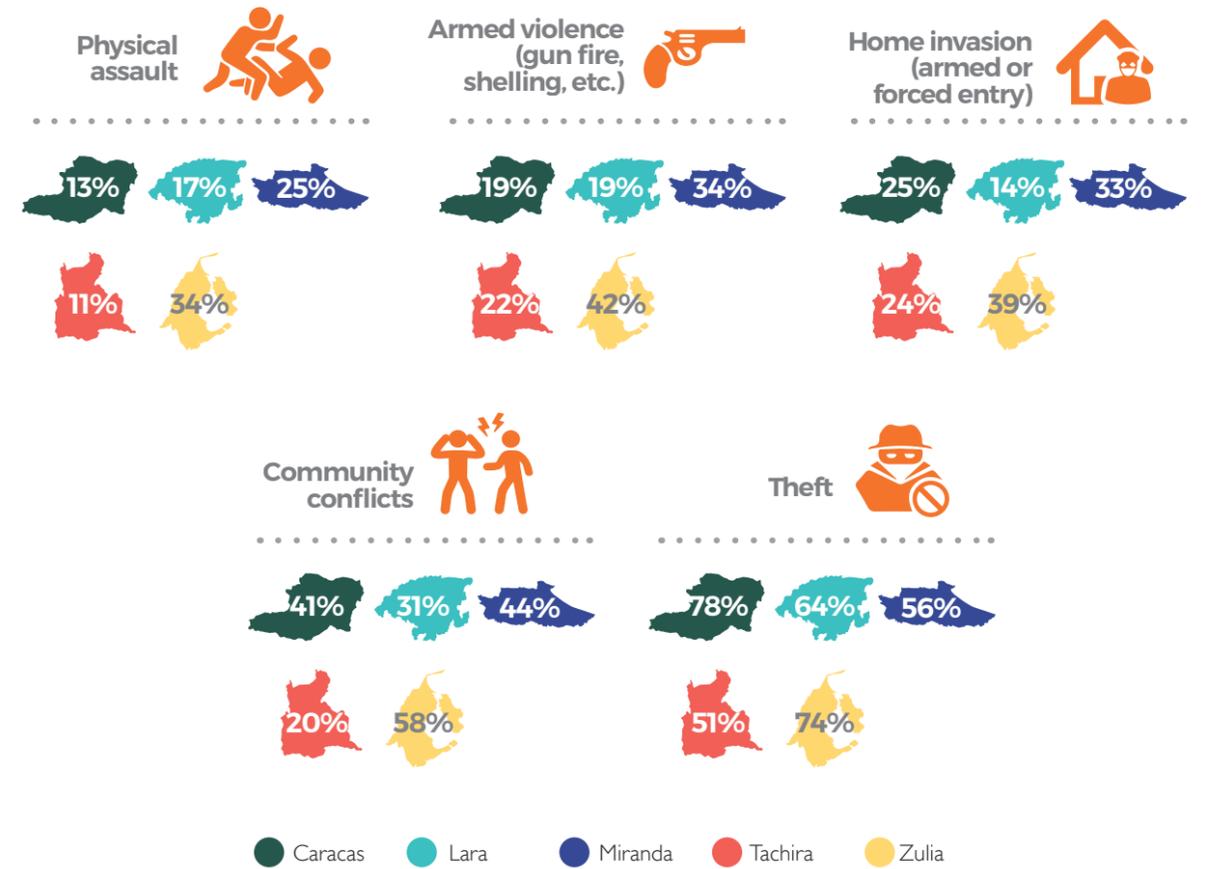
Source: Household survey

Although these situations remain the most important among all the States, it is worth mentioning that in the States of Caracas and Miranda the third most reported situation was the occurrence of armed violence with response rates of 42 per cent and 34 per cent, respectively. In the states of Lara and Táchira, 2 out of 10 households reported no threats in the communities, being in each state the second and third most common response option, respectively.

Alberto Gujin, World Vision Venezuela Response Office



Figure 20: Top 5 situations experienced by people in the community by state



Source: Household survey

On the other hand, according to the information collected through key informants, the security situation in the markets is unstable. They report that people tend not to feel safe when they attend markets mainly because they fear being victims of robbery, assault, intimidation, threats, etc. The communities Juan de Villegas, Lara and Junín, Táchira even report the risk of sexual assaults in these spaces. And in the case of Sucre, Caracas and Cristo Aranza, Zulia, the risk of discrimination and ethnic tensions in the markets is mentioned.

In 2016, the homicide rate was estimated at 49.2 per 100,000 inhabitants, which is the highest rate

among the Latin America and Caribbean Region being three times higher than the regional level (17.9 deaths by 100,000 inhabitants) and almost seven times higher than the world rate (6.4 deaths by 100,000 inhabitants). By gender, the homicide for men in 2016 was 90.3 deaths per 10,000 men, which is very high compared with the regional rate (31.3). Women faced a rate of 4.3 deaths per 10,000 women<sup>35</sup>.

It was not possible to obtain data regarding gender-based violence in Venezuela. However, regional trends show that women faced more risk in context of national instability; various assessments have shown that migrant women from Venezuela are more likely

35 Ibid 31.

to experience abuse, sexual violence, force labor and separation from families.

According to the household survey, the most vulnerable population groups are children who are separated

from their parents and/or relatives, those who drop out of school and female-headed households (see Figure 21). The last item is very relevant since 54 per cent of households in the States selected have a female-headed household.

Figure 21: "Most vulnerable population groups identified by household members".



Source: Household survey

Vulnerable groups vary considerably between States, which is why the following table gives an account of the different vulnerable groups identified in each

State. The presence of children separated from their parents and under the care of a relative or not is highlighted in 4 of the 5 states (see table 11).

Table 11: Top 3 most vulnerable identified by household members by state.

	Caracas	Lara	Miranda	Táchira	Zulia
Top 1	Children separated from their parents and/or relatives	Children separated from their parents and/or relatives	Children who drop out from schools	Family with more than 6 children	Children separated from their parents and/or relatives
Top 2	Female-headed households	Female-headed households	Female-headed households	Children under the care of sick/elderly caregiver	Children who drop out from schools
Top 3	Family with more than 6 children	Children under the care of sick/elderly caregiver	Family with more than 6 children	Youth involved in gang activities	Orphans with the care of relatives

Source: Household survey

In this regard, key informants identified in all communities estimated cases of children not living with their parents or under the care of usual caregivers such as grandparents, but with extended families. According to the perceptions shared during the interviews, it is estimated that on average there

are a total of 1,292 estimated cases of children in this situation in the nine identified communities. The State of Miranda has the highest number of cases, with an average of 381 children, followed by Zulia with 352 cases and Táchira with 249 cases (see table 12).

Table 12: Number of children without parents and unaccompanied children by state, municipality and community.

State	Municipality	Community	# children without parents or close relative under care of other relatives (extended family)	# of unaccompanied children with adults	# of unaccompanied children without adults
<b>Caracas</b>	<b>Libertador</b>	<b>Sucre</b>	<b>105</b>	<b>24</b>	<b>44</b>
<b>Lara</b>			<b>205</b>	<b>19</b>	<b>17</b>
	Iribarren	Juan de Villegas	194	9	7
	Palavacino	José Gregorio Bastidas	11	10	10
<b>Miranda</b>			<b>381</b>	<b>21</b>	<b>17</b>
	Guaicaipuro	Los Teques	238	6	13
	Sucre	Petare	143	15	4
<b>Tachira</b>			<b>249</b>	<b>248</b>	<b>21</b>
	Junin	Junín	132	131	2
	San Cristobal	La Concordia	117	117	19
<b>Zulia</b>			<b>352</b>	<b>124</b>	<b>210</b>
	Maracaibo	Cristo de Aranza	162	76	140
	San Francisco	San Francisco	190	48	70
<b>TOTAL</b>			<b>1,292</b>	<b>436</b>	<b>309</b>

Source: KII.

In addition, community leaders were asked to identify estimated cases of unaccompanied children. It is estimated that there are a total of 746 cases among the different communities, 436 of which live with adults with whom they are not related, and the remaining 309 do not live under the supervision of any adult, the latter being the cases where the child is in the greatest condition of vulnerability. The state that reports the largest number of unaccompanied children not living with adults is Zulia with a total of 210 cases, or 68 per cent of the total. It is important to know the main reasons for the separation of families, among which the migration of parents in search of work and food stands out, as well as the death of parents and children who run away from home.

Under the described context of insecurity in the communities due to the existence of delinquency and robberies, as well as the cases of children in condition of vulnerability. According to a report about the violence against children and adolescents done by Observatory of Violence in Venezuela (OVV) and Cecodap (Civil Society organization that advocate for child protection), during 2019 a total of 1,120 deaths among children (559) and adolescents (551) were reported, 425 were homicides, 88 suicides, 68 resistance to authority, and 539 area under investigation. The 67.2 per cent of the deaths were men and 32.8 per cent women. According to the report the top 5 states with the highest homicides number of children and adolescents are: Miranda

(79: 12 children and 67 adolescents), Zulia (50: 9 children and 41 adolescents), Bolivar (37: 3 children and 34 adolescents), Aragua (36: 7 children and 29 adolescents) and Distrito Capital (28: 7 children and 21 adolescents). The states of Lara (16 deaths) and Tachira (9 deaths) included also in the assessment are in top 9 and top 15, respectively<sup>36</sup>.

Another key component regarding protection is the access to a national ID that guarantee the access as a citizen to human rights laws, policies and services of protection. According to data from the period 2016-2018, 81 per cent of children under the age of 5 have a birth certificate affecting at least 400,000 children<sup>37</sup>. The lack of access to proper identification

can reduce the opportunities to access services, and given the context of high external migration flows in the country, this situation may lead to stateless children.

It is relevant to analyse which protection services the communities have access to and would be willing to ask them for support. According to the results obtained, the three main services that community members would request support in the event of a situation of abuse or violence are: reliable relatives/friends (76.5 per cent), religious services (71 per cent) and health services (63 per cent). School teachers, police and community leaders also have an acceptance rate of over 50 per cent in the communities (see Figure 22).

Figure 22: Services community members may seek for support in case of abuse, neglect, violence or exploitation.



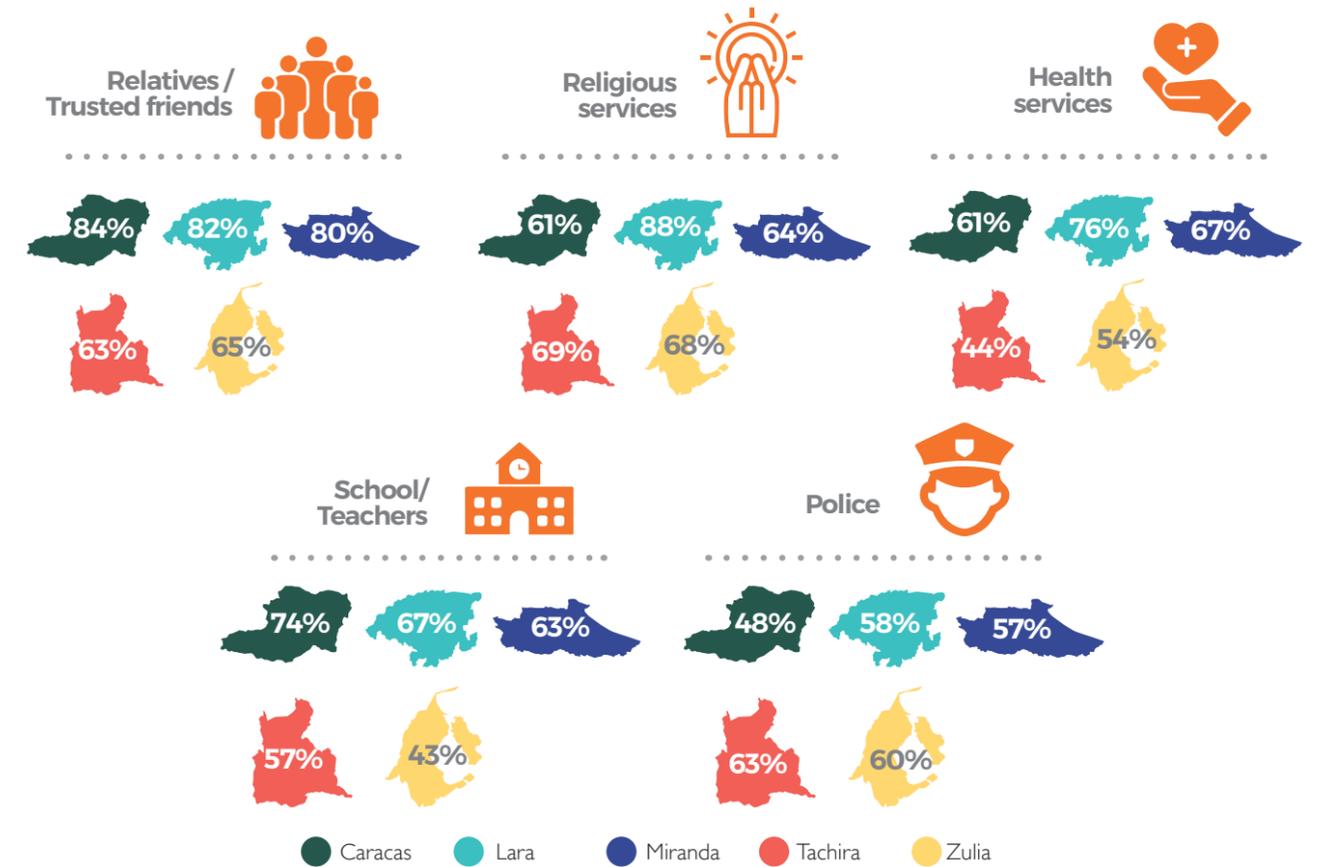
Source: Household survey

36 Cecodap / Observatory of Violence in Venezuela (2020). Informe Muertes Violentas de niñas, niños y adolescentes Venezuela 2019. <https://observatoriodeviolencia.org.ve/wp-content/uploads/2020/05/Informe-2019-Muertes-violentas-de-ni%C3%B1as-y-adolescentes-en-Venezuela.pdf>

37 UNDP. Human Development Reports. Human Security. <http://hdr.undp.org/en/countries/profiles/VEN>

It is important to highlight the reliability in Lara to religious services and health services. And in Caracas to school teacher.

Figure 23: Top 5 services community members may seek for support in case of abuse, neglect, violence or exploitation by state.



Source: Household survey

As for the services that are less requested, it is important to mention that they are not requested because of a perception that they are not helpful, but mainly because of availability. This is the case of: Orphanages/ Care Centers (71.2 per cent), Safe Spaces for Women (63.4 per cent), and Safe Spaces for Children (55 per cent), Social Welfare Department (40 per cent), and Community Protection Group (43 per cent). These results suggest that there is a weakness at institutional level in the provision of immediate support for the protection of community members, a reality that explains why the services that have an acceptance of more than 70 per cent are community-based options.

**The Solution**

In view of the above-mentioned problems faced by the selected communities in terms of protection and security issues, the main recommendations presented are: creation of safe areas for children to play, psychosocial counselling for children and parents, and promotion of family reunification

The latter two solutions are linked to the development of psychosocial support activities in communities as a measure to help them cope with the current crisis. As mentioned at the beginning of this chapter,

Mental Health was one of the least responded to problems, but it is one of the most severe problems. And the solutions proposed by those households

that identified it as a problem include activities for emotional support, grief and external shock processing, as well as promoting the rebuilding of family ties.

Figure 24: Top 3 solutions to Security and Protection problem. Total and by state.



Source: Household survey

### 5.2.6 Education

#### The Problem

Although Education was not among the five main problems identified at the community level, it is catalogued as one of the most severe problems,

and in the State of Zulia it was considered one of its main problems to be faced. Among the main causes associated with the problems experienced in this sector are: poor school infrastructure that makes buildings unsafe (47 per cent), children who are temporarily not attending school (44 per cent), and the occurrence of teacher strikes (44 per cent) – see table 13.

Table 13: Top 3 causes to Education problem. Total and by state.

	Total	Caracas	Lara	Miranda	Tachira	Zulia
School building damaged, unsafe	47.4%	41.5%	50.7%	24.0%	40.2%	79.2%
Children are not attending school (temporary)	44.4%	43.4%	46.8%	72.0%	40.3%	18.1%
Teachers don't come to school, strikes	43.8%	58.5%	49.9%	52.0%	52.0%	8.9%

Source: Household survey

About the problems of school infrastructure, according to key informants, school buildings have significant damage that makes their use unsafe. There is no recent data regarding the access of public services in the schools and regarding number of teachers and if they have been trained.

These results are related to those presented in the previous section where it was mentioned that one of the main groups at risk in the communities are children who do not attend school, as it can be seen



Mishelle Mitchell, World Vision LAC

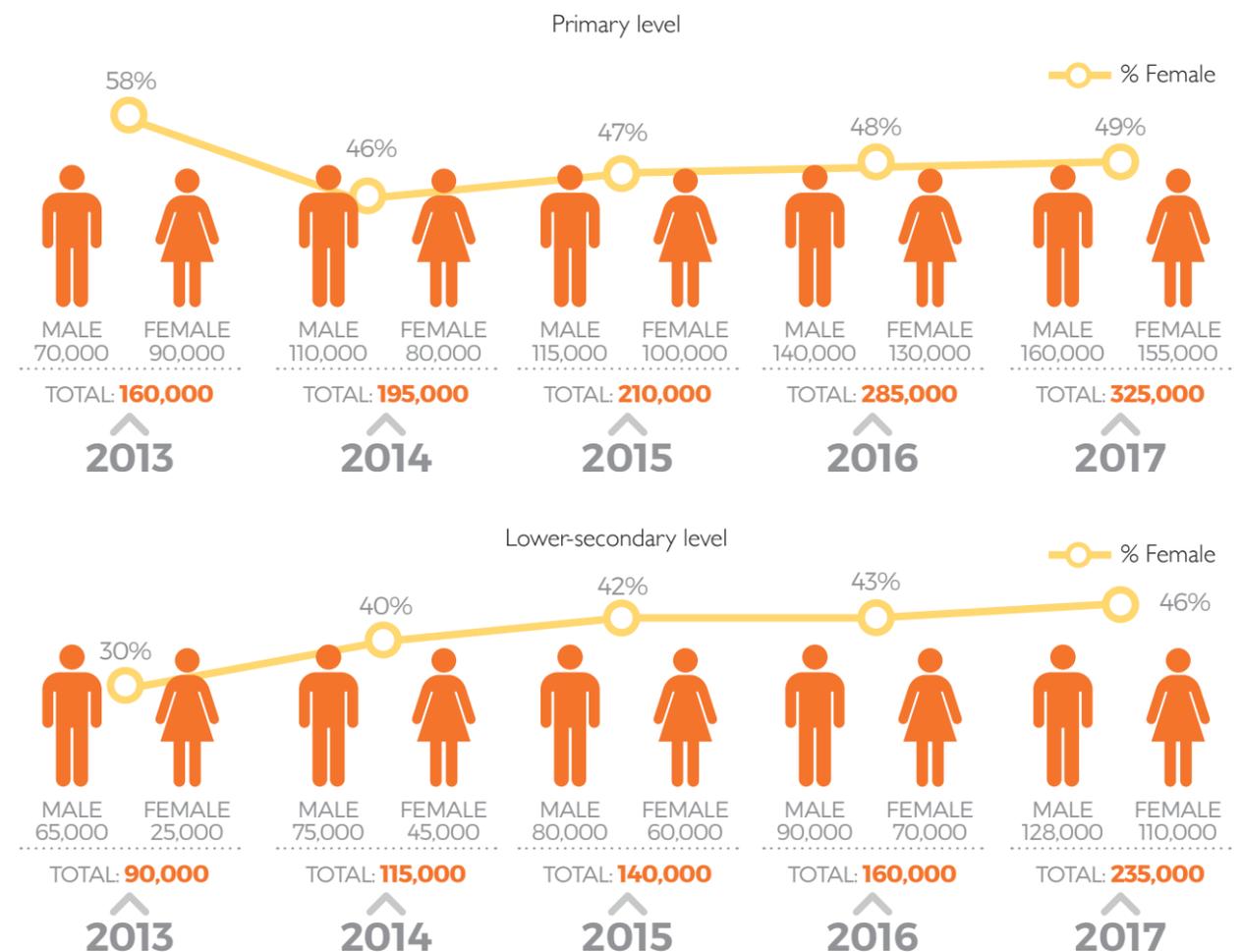
that dropping out of school translates in turn into risks for the safety and protection of the most vulnerable population. According to UNESCO (2017)<sup>38</sup> the total net enrollment ratio in primary for Venezuela is 90.4 per cent, showing a decrease of 5 points compared with the indicator from 2013 (95.24 per cent). Regarding secondary level, the net enrollment ratio in lower-secondary is 85.9 per cent which shows a decrease of 10 points compared with 2013 data (94.5 per cent); finally the net enrollment ratio is 76.6 per cent slightly lower than 2013 (78.1 per cent).

Despite the enrollment ratios have maintained high levels, the number of out-of-school children have increased. It is estimated more than 806,000 children were out of school in 2017, 40 per cent of them from primary level. The number has duplicated compared

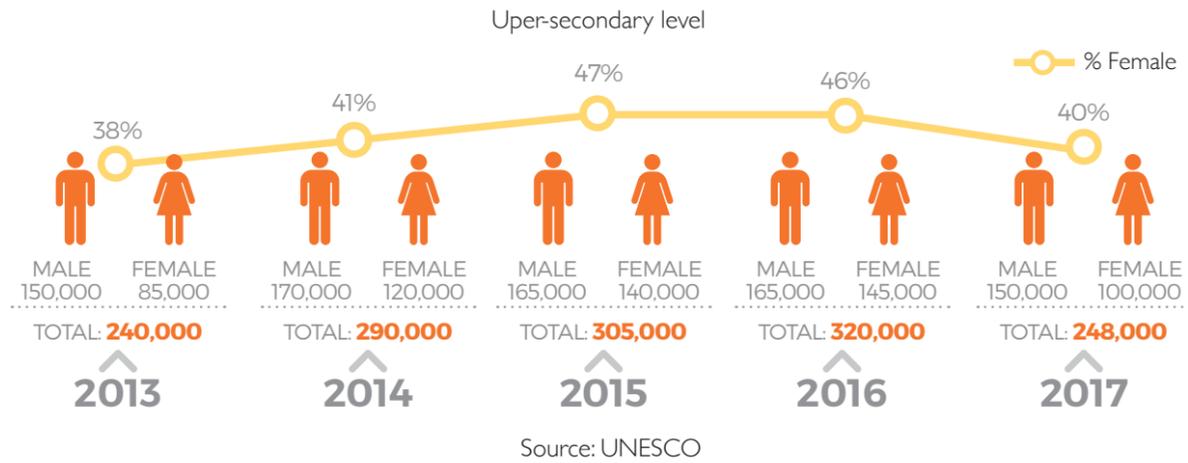
with 2013 were more than 493,500 children were out of school. Recent estimations suggest 1.1 million children are at risk of being out of school. Data disaggregated by gender suggests the highest percent of out-of-school children are boys, and it has a positive correlation with the level of education, since 60 per cent of out of school children in upper-secondary are boys, while in primary is possible to observe a gender parity in the rate (see Figure 25).

Poor infrastructure and school dropout are processes that can be dependent, insofar as not having adequate space to teach and provide safe spaces for children contributes to the accelerated the drop out of students from the education system. In addition to other contextual factors such as non-access to public services that have been mentioned above.

Figure 25: Number out-school children by education level, 2013-2017.



<sup>38</sup> UNESCO Database. <http://data.uis.unesco.org/>



**The Solution**

The solutions offered by community members are to repair the schools, which they identify as the first need that would also contribute to reducing school

dropout; to train teachers more and guarantee their payment by the government in order to reduce the occurrence of strikes. In the case of Miranda, the main solution is to guarantee a pay for the teachers and trained them.

Figure 26: Top 3 solutions to Education problem. Total and by state.



**5.2.7 Access to livelihoods and non-food items**

In this section it has been decided to link the analysis of livelihoods together with the coverage of basic needs in the communities, due to the close relationship between both areas.

**Livelihoods**

In terms of livelihoods, although it was not one of the main problems directly reported by community

members, except in the State of Miranda where it was listed as the fifth most relevant problem. The main underlying causes of this problem identified by household members are the inability of households to meet their basic needs with a response rate of over 90 per cent in all states. Followed by a lack of employment opportunities (47 per cent) and observable poverty levels in the communities (46 per cent) – see table 14

Table 14: Top 3 causes to Livelihoods problem. Total and by state.

	Total	Caracas	Lara	Miranda	Tachira	Zulia
Can't meet basic needs	91.4%	95.0%	96.0%	93.1%	80.4%	91.2%
No employment opportunities in or near community	47.5%	55.0%	45.1%	31.0%	61.6%	66.4%
Poverty	45.9%	55.0%	39.6%	24.1%	61.6%	85.4%

Source: Household survey

The poverty levels in Venezuela, according to the Living Conditions Survey (ENCOVI), have doubled since 2014. For 2017, it is estimated that eight out of 10 households are poor; 61 per cent of them reported to be in extreme poverty. The ENCOVI results also suggest a geographical inequality in the distribution of poverty levels around Venezuela; in rural areas and small cities around 75 per cent of households are poor compared with 34 per cent in the metropolitan area of "Gran Caracas" and 43 per cent in major cities.

In the other hand, the estimation of multidimensional poverty carried out by the ENCOVI suggest that 51 per cent of households are poor. The percentage is lower than the mentioned above since the estimation included additional variables for the estimation, not only the income level. The main dimensions contributing to the indicator are the decrease of income (40 per cent), the low quality of services (19 per cent), housing conditions (16 per cent), employment rates and social welfare (15 per cent), and education (10 per cent).

Before discussing proposed solutions to this problem, it is important to analyse how households in communities obtain the resources and means to meet their needs. According to the households consulted, the main source of household income is the salary obtained from a formal job (41 per cent), followed by the development of casual (daily) work (33 per cent) and finally trade (28 per cent). It is important to note that the last two sources mentioned tend to be linked to informal jobs so the income levels may vary depending on market conditions.

It is worth mentioning the role played by pension funds, 26 per cent of households identify them as one of their sources of income. Pension funds

represents a monthly wage between Bs 300,000 – 400,000 representing less than US 2,50. Aid or charity represents 11 per cent. On this last point, around 4 per cent of households report receiving State Aid, which in the case of the Lara have a share of 11 per cent; by State Aid we mean mainly the use of the Carnet de la Patria, which as mentioned in the context section is the largest cash transfer program lead by the government. Finally, around 8 per cent of households mentioned receiving of remittances.

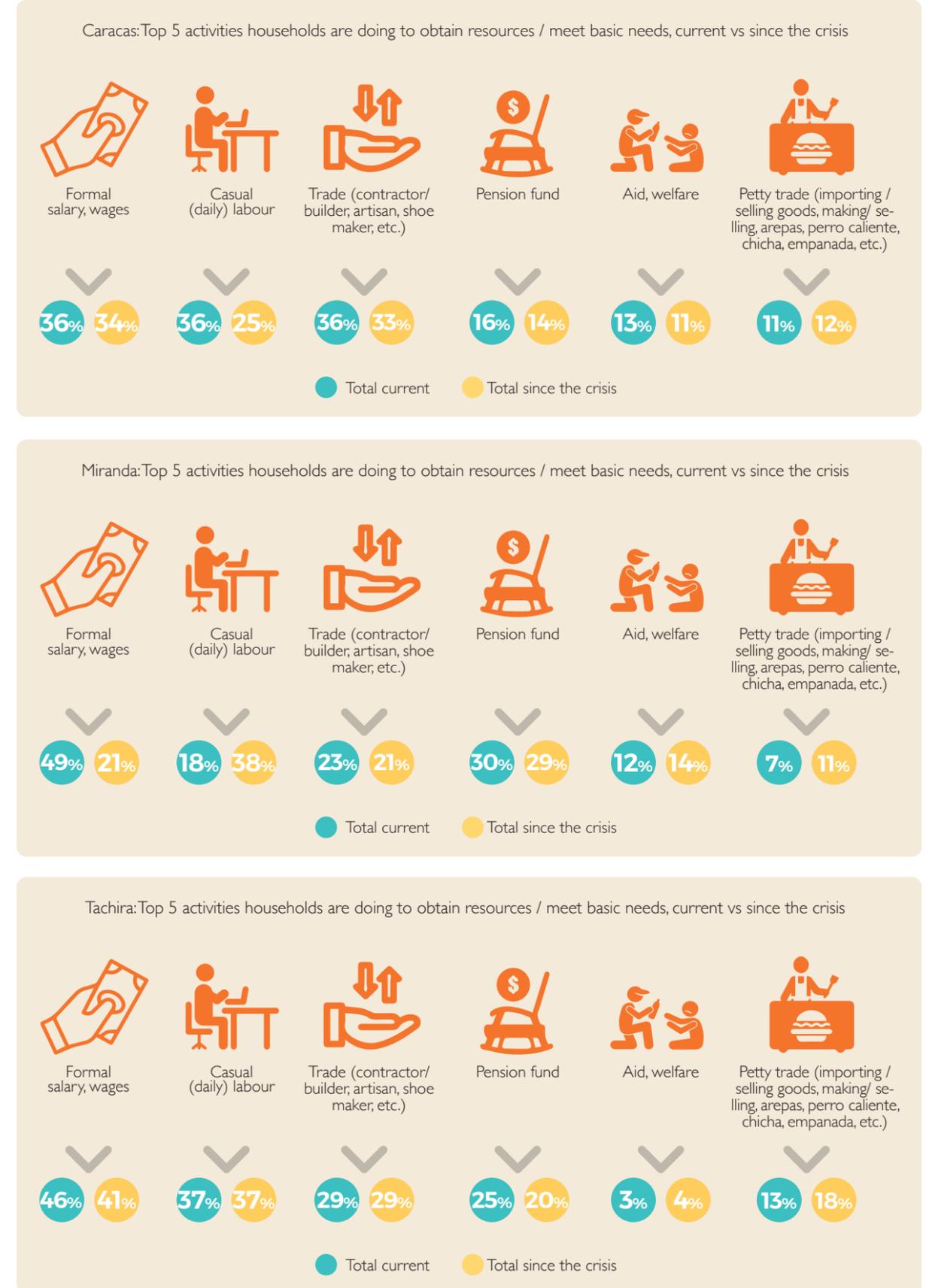
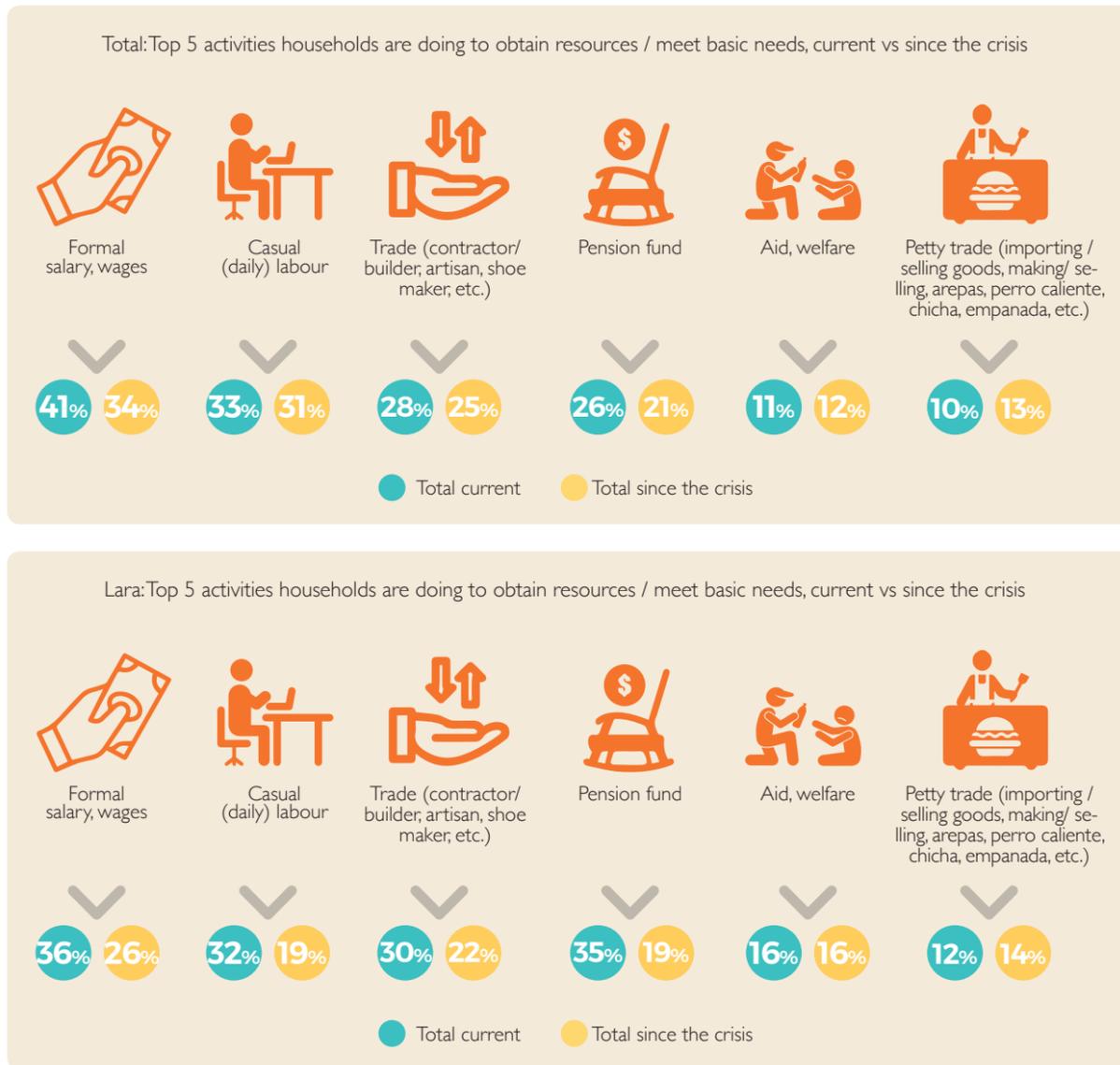
Due to the economic and social situation, it is estimated that there are at least 7 million people in Venezuela who require some type of assistance OCHA (2019). The Venezuelan government spends approximately \$3 billion annually in direct transfers for about 11 million people<sup>39</sup>. Direct transfers are administered through social registries (e.g. Carnet de la Patria), and supported by digital banking services. During the last years, the national government has implemented social protection programs giving aid for access to food, housing, health and education. The programs are implemented through Local Supply and Production Committees (CLAP). According to WFP (2020) around 92 per cent of households covered by the assessment reported to receive this kind of social aid. However, recent economic situation of the country have affected the scope and ways of implementation of the programs by reducing the purchasing power of the cash transfers and as well the quantity of food aid that can be distributed. According to the ENCOVI 2017, at least 50 per cent of the households reached through these programs not receive periodically the aid, the percentage increase to 69 per cent in rural areas and small cities. However, in the metropolitan area of Caracas and Miranda 64 per cent of reached households report receiving the aid every month and 24% every two months.

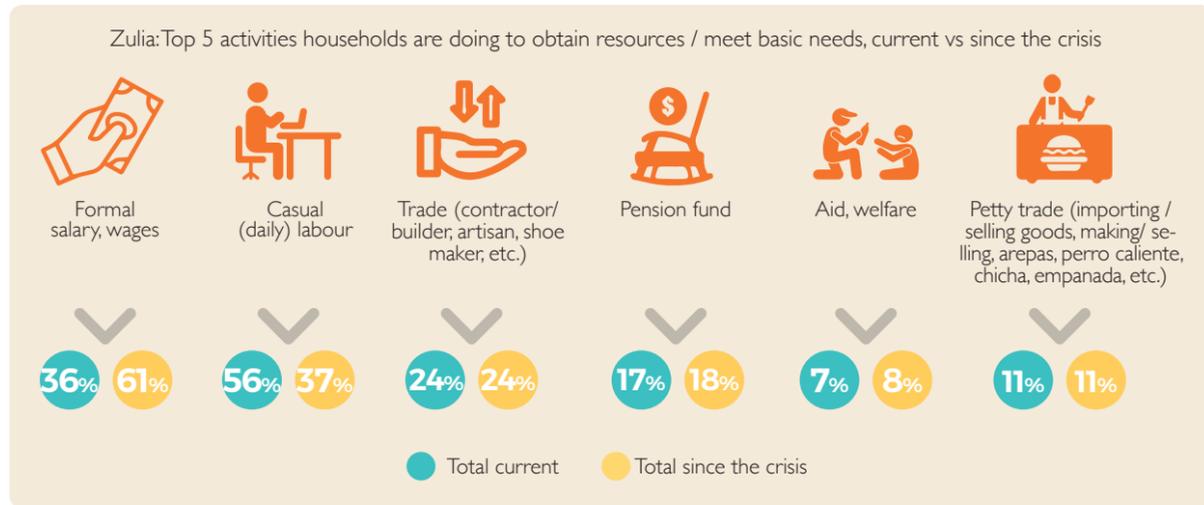
39 Ibid 21

Similarly, respondents were also asked what activities they have been doing since the crisis to earn income and meet their basic needs. The first is the development of casual (daily) work (34 per cent) as the main activity, followed by obtaining a formal salary and trade. A 13 per cent of households mention the development of petty trade to obtain resources by selling of goods and making food for sale. The responses suggest that since the crisis, households have focused their efforts on carrying out informal sector activities in order to guarantee income for the household.

It is important to highlight the effects of subsidies and remittances has on the livelihoods of the communities. The community leaders consulted for this assessment estimated that on average 6 out of 10 households in the communities receive some type of aid from the government, with the communities of Miranda standing out with a rate of over 90 per cent, followed by Zulia (60 per cent) and Lara (40 per cent). Finally, for remittances, it is estimated by community leaders that half of the households receive them. Zulia has the lowest incidence of this type of transfer, with an average of 40 per cent.

Figure 27: Comparison of before and existing top 5 activities to obtain resources and meet basic needs.





Source: Household survey

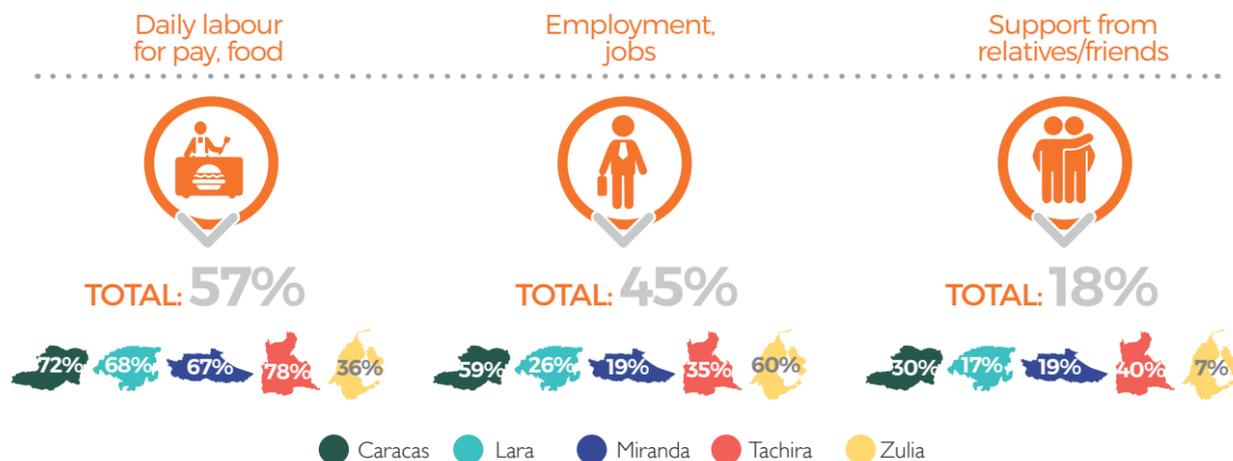
**The Solution**

Finally, the main solutions suggested by the communities are the development of daily work to be able to pay for food (57 per cent), obtaining jobs (45 per cent) and support from family/friends (18 per cent) – see Figure 28. The fact that the main solution to guarantee access to livelihoods is the development of daily work proves the effectiveness that this activity has had as a coping mechanism used by households to adapt to the current reality of Venezuela's economic situation. At state level, the main solution for Zulia is the provision of employment rather than guarantee a daily job for

pay or food. Regarding the solution of provision of employment/job is less common in states such as Lara and Miranda. And the support of families/friends is most common in Tachira and Caracas.

The identification of these top solutions by the household members interviewed may be a reflection of high unemployment rates in the communities. World Vision will take into account the proposed solutions while also looking for other sustainable solutions such the promotion of small scale business, petty trade and vocational training that can promote a small-scale reactivation of household's economy.

Figure 28: Top 3 solutions to Livelihood problem. Total and by state.



Source: Household survey

**Access to non-food items**

Regarding the access to NFIs, even though there is no data regarding the supply level of this kind of products, it is possible to notice from a variety of assessments carried out that high inflation have decreased the access to items such as hygiene products, clothing, among others.

The following section analyses the coverage that households have of the different basic needs assessed. What can be observed is that in all categories the coverage is less than 50 per cent, which suggests that half of the population has partial or no coverage of their needs. The needs with the lowest coverage rate are Clothing and footwear, water storage tanks and containers, and buckets. These last two results were addressed in detail in the Water section.

Another important factor to consider is how households access money. According to information shared by community leaders, the main way people in their

communities access money is through bank deposits. The communities of Táchira stand out, where their main method is to claim the money at money transfer agencies, most likely received by family members outside the country who send remittances.

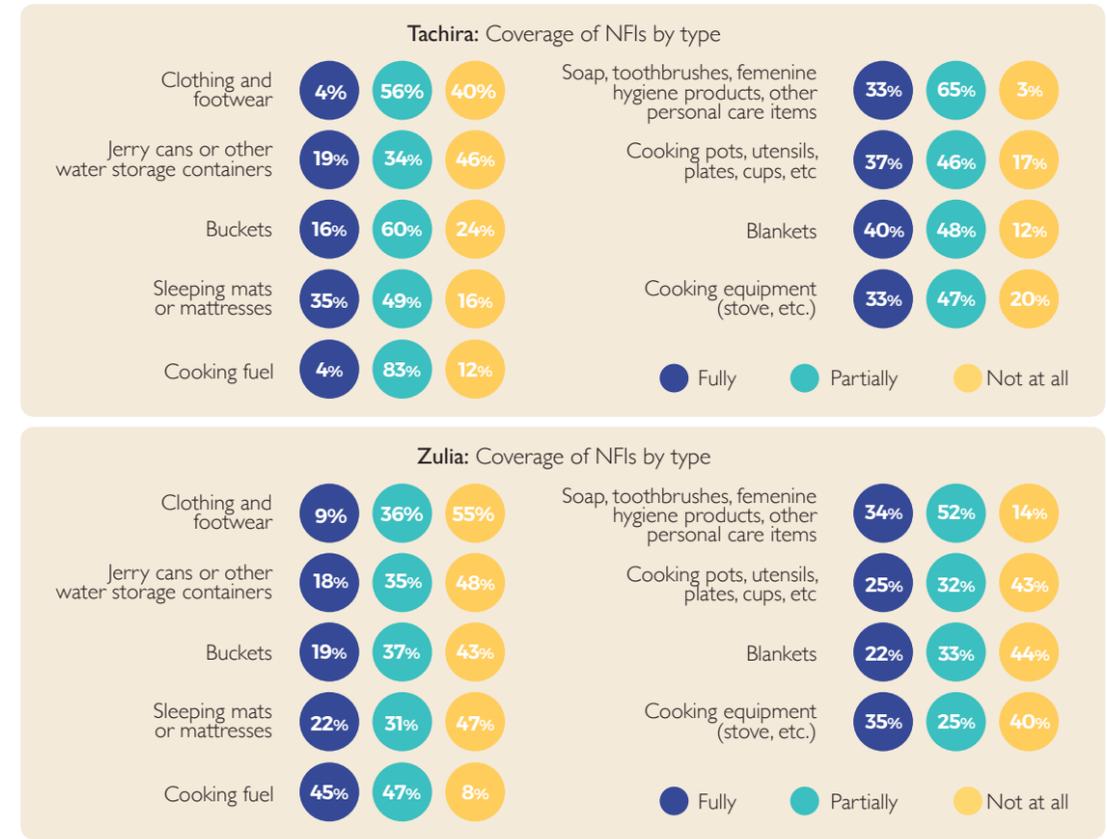
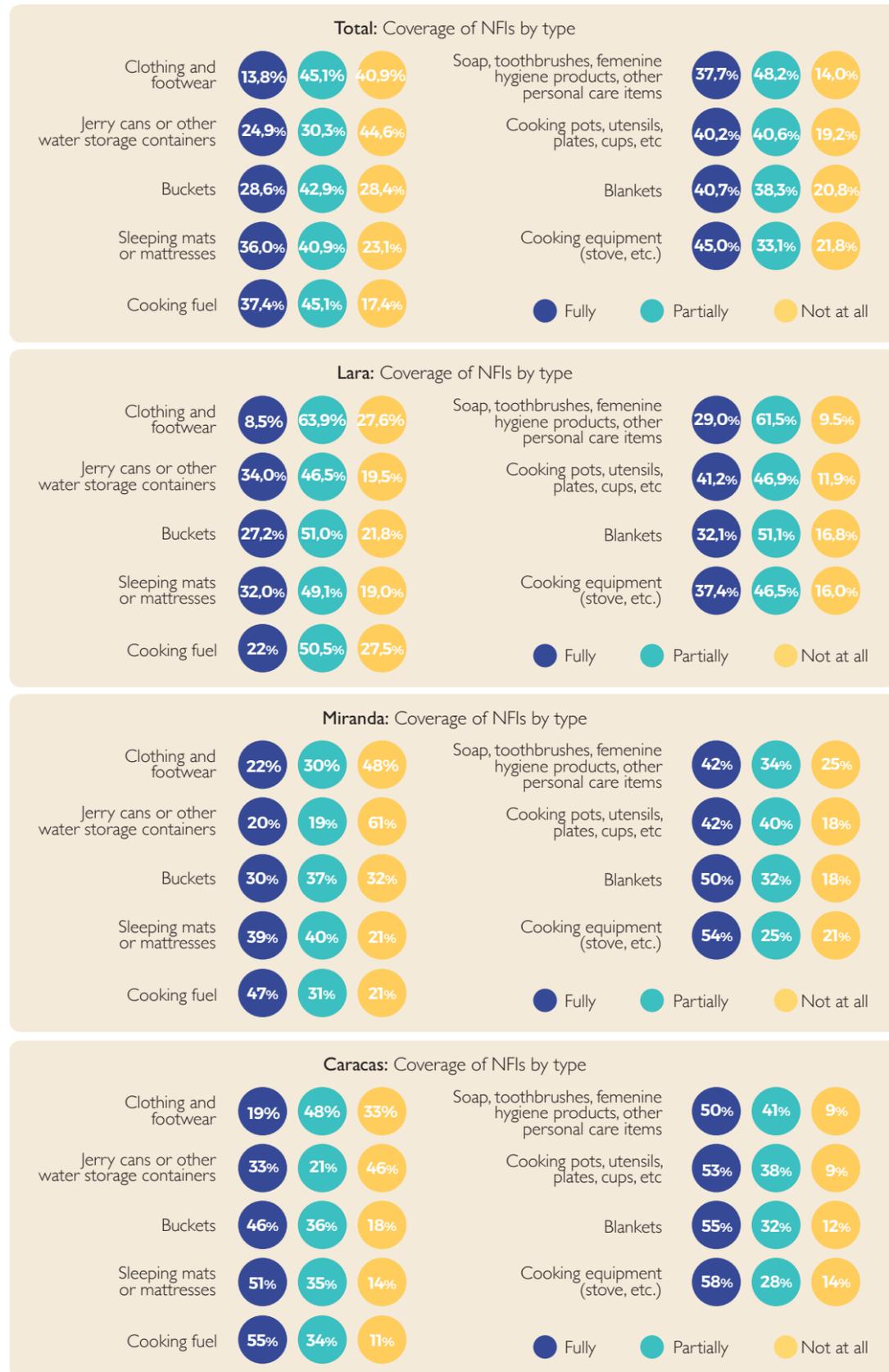
As is well known, Venezuela is currently under a context of hyperinflation that further limits coverage of basic needs. Given this context, it is pertinent to know the strategies implemented by households to address the high level of prices, because, as reported by the key informants, the price of basic needs goods is currently higher. The two main strategies implemented by households to deal with inflation are: use of dollars or another currency and spending bolivars as soon as they can. It is important to note that in most communities the inhabitants also implement barter practices for the exchange of necessary goods. Currently, to counteract the loss of value of the national currency, about half of the transactions in Venezuela occur in U.S. dollars<sup>40</sup>.



Bokitas Foundation

40 BBC, November 2019, "El dólar en Venezuela: cómo sobreviven quienes solo tienen bolívares," <https://www.bbc.com/mundo/noticias-america-latina-50497749>

Figure 29: Coverage of NFIs by type: total and by state.

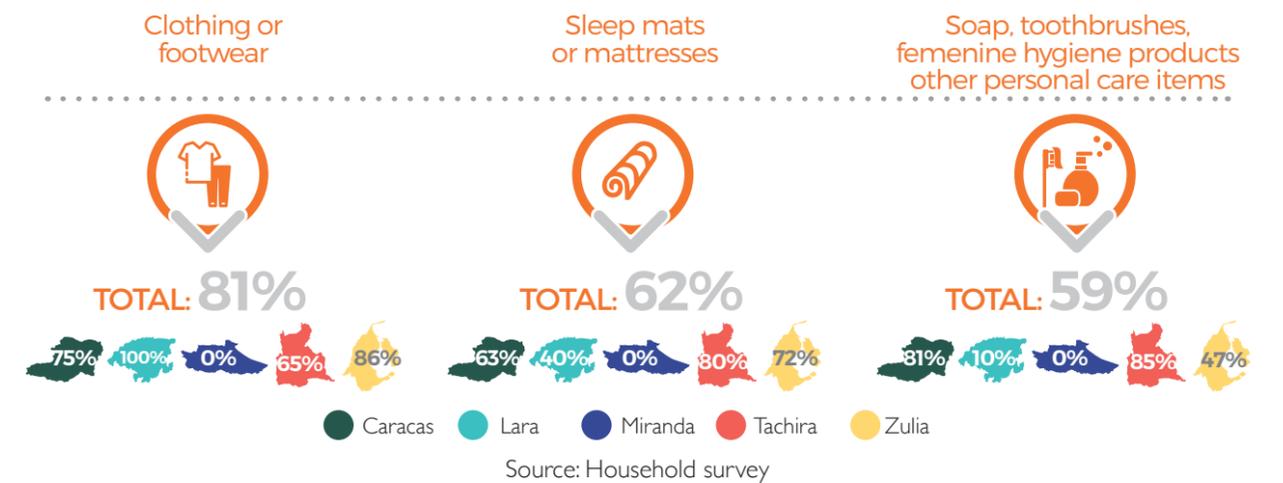


Source: Household survey

Finally, the solutions proposed by the communities to respond to the low coverage of non-food items are: guaranteeing access to clothing and footwear (81 per cent), providing mattresses or sleeping mats (62 per cent) and providing personal hygiene products to households (59 per cent). In the case of

Miranda, there are no responses since this was not a problem identified by the household members. In Lara the provision of hygiene items seems not to be a priority, since it has a non-coverage rate less than 10 per cent, the lowest rate among the NFIs in the state.

Figure 30: Top 3 solutions to NFIs access problem. Total and by state.



Source: Household survey

At the end of this section, it is important to mention activities, skills or resources household members themselves could offer to support the recovery efforts being made in the community to deal with the crisis. The main activity mentioned by households is manual work (53 per cent), followed by cooking for workers and others (34 per cent) and support for childcare (30 per cent) – see table 15. As can be seen, these are activities that entails high

level of involvement from community members, which can contribute to increasing the levels of community participation and ownership of recovery activities.

In the case of the States of Lara, Tachira and Zulia the donation of food and ensuring access to clean water are activities that would increase the support of household members to recovery efforts.

Table 15: Activities, abilities or resources that could contribute than household members support community recuperation from the crisis. Total and by state.

	Total	Caracas	Lara	Miranda	Táchira	Zulia
Manual labour (cleaning, digging, tilling, etc.)	53.4%	62.6%	49.8%	51.0%	50.2%	55.4%
Cooking for labourers or others	33.6%	41.2%	41.7%	31.1%	22.7%	27.3%
Care for children	29.7%	46.3%	17.1%	40.9%	21.3%	16.4%
Potable water	23.9%	31.1%	29.8%	17.9%	25.4%	18.6%
Food donation	23.5%	30.0%	22.8%	17.9%	29.3%	24.1%

Source: Household survey

### 5.3 Humanitarian accountability

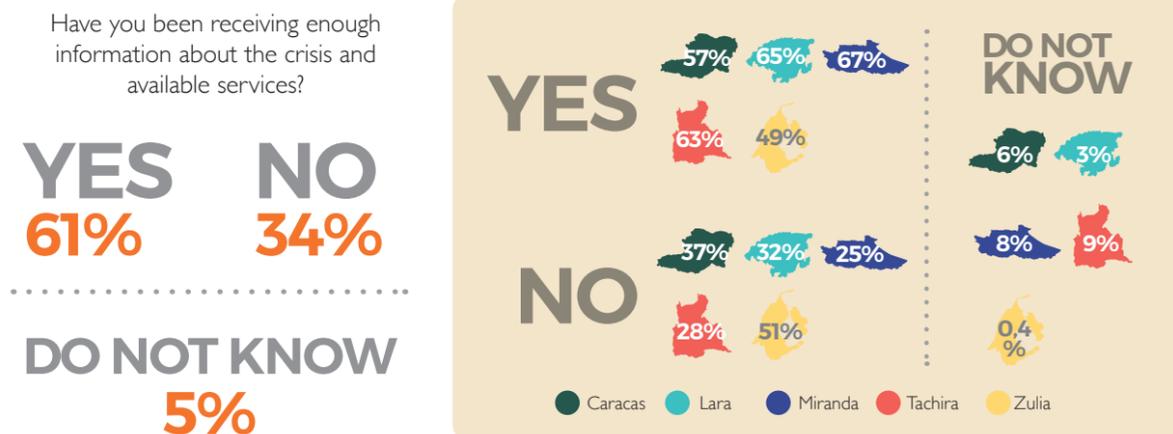
This section is focus on the access to information and available services since the crisis, as well as the channels through which they prefer to obtain information.

More than 99 per cent of the people surveyed in the selected communities report having a command of the Spanish language. They also report that on

average in 8 out of 10 households all members can speak their native language.

It is estimated that 6 out of 10 households have received sufficient information about the crisis and services. However, 34 per cent of households have a knowledge gap that needs to be addressed. The highest information gap are in Zulia (51 per cent) and Caracas (31 per cent) – see Figure 31.

Figure 31: Receive of sufficient information about the crisis and available services. Total and by state.



Source: Household survey

With the information channels preferred by households to receive information, it is worth noting that more than 50 per cent of households prefer communications delivered directly in the community, highlighting first

the development of face-to-face meetings with the staff of the NGO that is implementing the actions (57 per cent), followed by the development of community meetings (50 per cent).

Figure 32: Preferred channels in the communities to receive information.



Source: Household survey

About 30 per cent of the households mention the preference of the use of social networks in receiving information, however, it is important to take into account the access that these communities have to the electric service, and to the network connectivity (see Digital Literacy section).

Among the main options are also obtaining information through the church/temple/mosque (23 per cent), through printed materials (22 per cent) and with the implementation of a billboard in the community (21 per cent). Especially in the states of Lara and Miranda prefer these last two options. In the case of the state of Zulia, they also mention a preference for being able to send text messages to the organization's staff (see Figure 33).



Mishelle Mitchell, World Vision LAC

Figure 33: Preferred top 5 channels in the communities to receive information by state.



Source: Household survey

### 5.4 Presence of aid agencies and services provided

According to the information shared by key informants, it was possible to identify a total of 26 organizations that provide services to the communities mainly in the areas of food, health, and child protection. Among the organizations with a presence in the communities, the following stand out Alimenta la Solidaridad, Caritas, the Community Council and local authorities, among others. According to the leaders, these services

are serving the affected population and vulnerable groups in the community.

Regarding the distribution of aid, it is mentioned in most cases they are controlled by the Local Government, which is in charge of coordinating the activities that take place in the community. It is important to highlight that in the community of Cristo Aranza, Zulia, the armed-groups with presence in the area are identified as a third actor involved in the distribution of aid. The table below summarises the list of agencies providing services as per KII data.

Table 16: List of NGOs, Government agencies & community based organizations providing assistance identified by community.

Location	NGOs, Government agencies & community based organizations providing assistance	Services provided	Other services provided	Control over distributions
Sucre, Libertador, Caracas	Alimenta la solidaridad Provene Caracas mi convive HIAS Venezuela	1. Child protection / VBG 2. Food / Nutrition 3. Health 4. Non-Food Items (NFI) 5. Livelihoods (small businesses) 6. Education in Emergencies	Psychosocial support to victims of violence, legal counselling, family planning, rehabilitation of youth and sport spaces Training in leadership, skills and competences	1. local government 2. Entities / aid organizations
Los Teques, Guaicaipuro, Miranda	Gubernamentales Fundacrecer Las monjas de palo alto	1. Food / Nutrition	Dining Facilities	1. local government 2. Entities / aid organizations
Petare, Sucre, Miranda	Alimenta la Solidaridad CESAP World Central Kitchen	1. Food / Nutrition 2. Health	Education for children	1. local government 2. Entities / aid organizations 3. (Non-governmental) local community representatives
Juan de Villegas, Iribarren, Lara	Alimenta la Solidaridad Caritas CLAP	1. Food / Nutrition 2. Health 3. Water / Sanitation		1. local government 2. (Non-governmental) local community representatives
José Gregorio Bastidas, Palavecino, Lara	Alimenta la Solidaridad Casa alimentación abuelos (Gobierno)	1. Food / Nutrition		1. local government 2. (Non-governmental) local community representatives
La Concordia, San Cristobal, Táchira	Rotary Club Alimenta la Solidaridad Fundaprecom Concejo Comunal CNR HIAS	1. Food / Nutrition 2. Health 3. Child protection / VBG 4. Non-Food Items (NFI)	Recreation, Hygiene kits, Prevention of violence	1. local government 2. Entities / aid organizations 3. (Non-governmental) local community representatives
Junin, Junin, Tachira	Alimenta la Solidaridad Club de Leones Caritas Amijunin Estado	1. Food / Nutrition 2. Health 3. Child protection / VBG 4. Livelihoods (small businesses) 5. Education in Emergencies		1. Entities / aid organizations 2. Other: Catholic church
Cristo de Aranza, Maracaibo, Zulia	Alimenta la Solidaridad Partido Primero Justicia Concejo Comunal Gobierno Local	1. Food / Nutrition 2. Health 3. Non-Food Items (NFI) 4. Livelihoods (small businesses) 5. Education in Emergencies	Family Awareness Talks	1. Entities / aid organizations 2. local government 3. armed groups / factions controlling the area
San Francisco, San Francisco, Zulia	Alimenta la Solidaridad Cruz Roja Caritas Organizaciones con comedores Instituto Psicopedagógico Unidad Psicoeducativa Eugenio Sanchez Garcia	1. Food / Nutrition 2. Non-Food Items (NFI) 3. Other 4. Health 5. Education in Emergencies	Education for children with learning difficulties Awareness days	1. Entities / aid organizations 2. (Non-governmental) local community representatives

Source: KII

## 5.5 Digital Literacy

This last section addresses the access that households have to cell phone services, as well as to tools for financial inclusion.

### 5.5.1 Access to cellphones

It is estimated that a household has an average of one cell phone, in the case of Táchira an average of two cell phones per household can be observed, as well as in households with nine members or more.

Aranza, Zulia do not have access to the service. On average, the communities with partial access to the service may not have signal on their devices for up to six (6) hours a day, highlighting the community/parish of Juan de Villegas, Lara where on average they do not have signal thirteen (13) hours a day. Additionally, the communities face challenges to paid for mobile phone service with nearly 3 out of 10 households report not having the money to buy airtime and data packages.

It is important to mention that 17% of the households surveyed do not have a cell phone. The states of Caracas, Lara and Miranda stand out, where an average of 2 out of 10 households report not having a mobile phone. Táchira reports the lowest rate of not having a cell phone with 9.6 per cent, followed by Zulia with 14 per cent.

Table 17: Quantity of working cellphones per household by sociodemographic variables.

	Average
<b>Overall</b>	1.4
<b>By zone of residence</b>	
Urban	1.5
Peri-Urban	1.4
Rural	1.4
<b>By State</b>	
Caracas	1.5
Lara	1.4
Miranda	1.3
Tachira	1.8
Zulia	1.5
<b>By Household size</b>	
One-headed household	0.7
Between 2 to 4 members	1.4
Between 5 to 8 members	1.5
9 members and more	1.8

Source: Household survey

In terms of the uses of the cell phones, 80% of households mention using them to make and receive voice calls. Followed by 33 per cent that transmit and receive information, and 25 per cent to download content from the web. It is noteworthy to mention that 2 out of 10 households use the cell phone to access the Mobile Banking of their bank. The states that report the highest percentages for this use are Lara (35.4 per cent) and

Caracas (28 per cent) and in the case of Táchira and Zulia, an average of 11 per cent of households reported. Additionally, the use of mobile money accounts is common in Lara where 1 out of 4 household uses

the mobile cellphone to access to them, followed by Caracas with 20 per cent. Finally, around 22 per cent of households in Zulia and 17 per cent in Lara use their cellphone to send and transfer money – see table 18.

Table 18: Uses given to mobile phones. Total and by state.

	Overall	Caracas	Lara	Miranda	Tachira	Zulia
Communication (place and receive voice calls)	79.9%	76.7%	81.7%	79.4%	89.0%	75.6%
Transmit and receive information (text, videos, documents etc.)	32.7%	35.0%	18.8%	35.0%	45.8%	36.1%
Download information from the web	25.0%	26.1%	20.5%	23.7%	28.7%	29.5%
Mobile banking	23.6%	27.6%	35.4%	24.9%	11.6%	10.3%
<b>Do not have mobile phone</b>	<b>16.9%</b>	<b>20.6%</b>	<b>19.1%</b>	<b>17.9%</b>	<b>9.6%</b>	<b>13.7%</b>
Conduct business	15.2%	16.3%	16.8%	7.0%	6.6%	31.9%
Mobile money accounts	14.7%	19.8%	25.4%	11.7%	9.9%	4.0%
Watch videos	13.6%	22.6%	7.5%	18.3%	14.8%	3.9%
Play games	13.2%	18.3%	4.4%	19.1%	9.0%	12.8%
Sending and receiving money	12.7%	14.4%	16.9%	6.2%	4.9%	21.7%
Others	1.9%	.0%	1.3%	4.7%	.9%	.2%

Source: Household survey

The most used applications are WhatsApp and Facebook, with usage rates of 62 per cent and 45 per cent, respectively (see table 19). These percentages are maintained at the state level. It is important to note that in the case of Zulia, 82 per cent of households report using WhatsApp. Also 23 per cent of households report not using any applications, the highest rate is

in Caracas with 31 per cent, and around 11 per cent of households have a basic/analogue telephone and therefore cannot have access to this type of applications. The use of analog cell phones is higher in the states of Miranda (17.5 per cent) and Lara (15.1 per cent). In the case of Zulia less than 1% of the homes report having this type of cell phone (see table 19).

Table 19: Most common applications used in mobile phones. Total and by state.

	Total	Caracas	Lara	Miranda	Tachira	Zulia
Whatsapp	62.2%	52.1%	55.3%	56.0%	76.6%	81.6%
Facebook	45.1%	45.9%	46.7%	35.4%	52.6%	53.9%
Google	30.2%	38.1%	21.8%	29.6%	39.8%	28.3%
Instagram	24.5%	27.6%	15.3%	20.6%	30.0%	36.6%
None	22.8%	31.9%	23.8%	25.7%	15.0%	13.2%
Games	11.4%	19.8%	2.0%	14.4%	10.5%	10.9%
<b>Have a basic phone</b>	<b>11.4%</b>	<b>10.5%</b>	<b>15.1%</b>	<b>17.5%</b>	<b>5.3%</b>	<b>.7%</b>
Twitter	10.5%	12.1%	4.3%	8.9%	17.5%	15.0%
Others	1.2%	2.3%	1.7%	.0%	1.8%	.9%
pinterest	0.6%	1.2%	.0%	.8%	1.5%	.0%

Source: Household survey

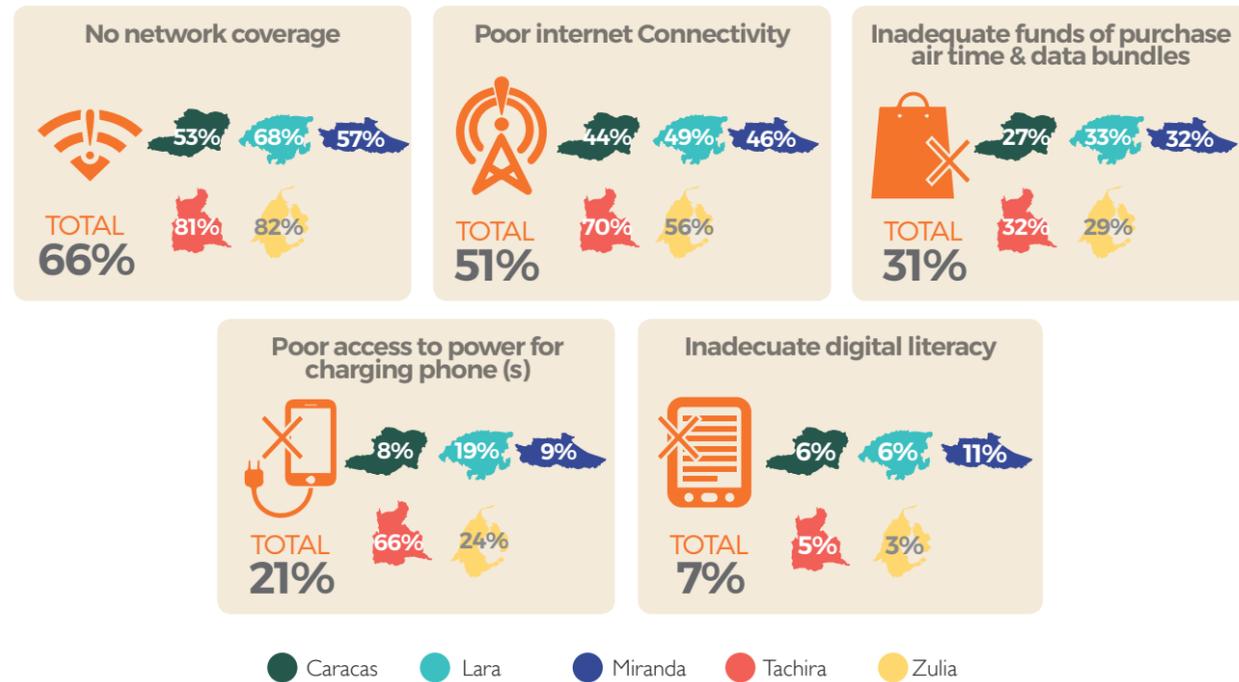


Golda Ibarra, World Vision LAC

It is important to mention the challenges that households face when using cell phones, the main challenge is the lack of network coverage (66.2 per cent) and poor internet connectivity (51 per cent). As mentioned at the beginning of the section, the selected communities report intermittent cellular signal service (see Figure 34). However, even if access to the signal and the internet were to be

improved, nearly 3 out of 10 households report not having the money to buy airtime and data packages, and 2 out of 10 report that constant problems with the electricity supply do not allow them to charge their cell phones as explained in Roads and infrastructure section above. At state level it is important to highlight the main issue faced in Tachira accessing to power to charge their phones.

Figure 34: Main challenges while using mobile phones. Total and by state.



Source: Household survey

The results presented regarding the use and access of cell phones are relevant for the design of interventions in the community, as they give a clear idea of the connectivity conditions in the communities that affect the application of tools that promote the use of information and communication technologies (ICTs).

### 5.5.2 Financial inclusion

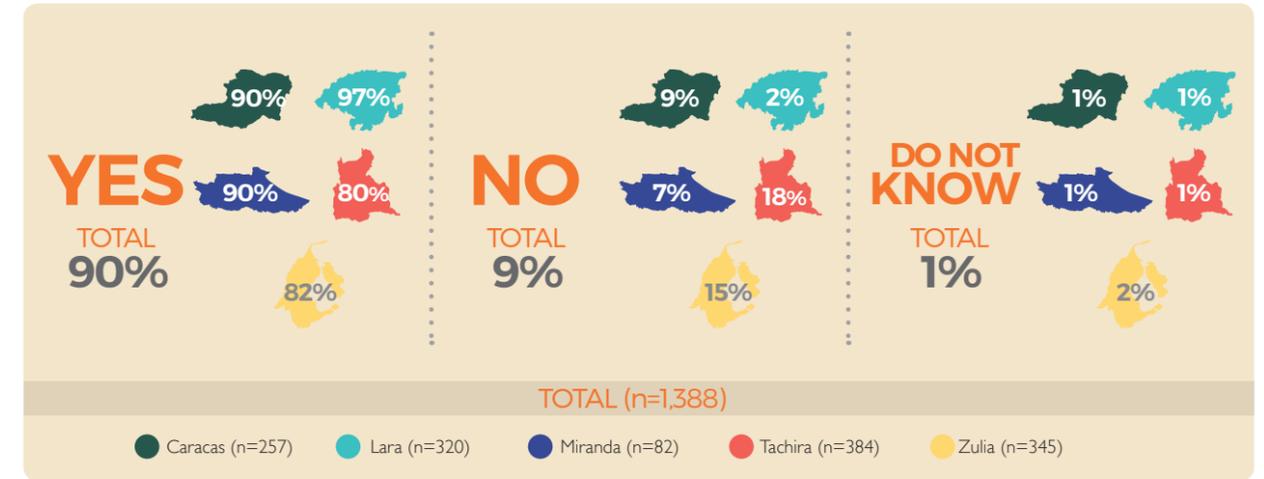
According to the Global Financial Index (2017) developed by World Bank, almost 73 per cent of adults in Venezuela have a bank account and also made or receive digital payments in the last year. About 60 per cent of adults report to have used the internet to pay bills or to buy something online<sup>41</sup>.

41 World Bank. Global Financial Index 2017. <http://documents.worldbank.org/curated/en/332881525873182837/pdf/126033-PUB-PUBLIC-pubdate-4-19-2018.pdf>

On average, 9 out of 10 households in the selected communities have a bank account, which shows the high inclusion to the financial system. The lowest percentages of bank account holding are observed in the states of Táchira and Zulia with 80 per cent and 82 per cent, respectively; which are still high values (see Figure 35). A total of 26 branches of banks where identified in the communities selected,

Caracas and Lara have the higher numbers with 20 and 21 branches, respectively. Miranda, Táchira and Zulia have an average of 14 branches. The most common banks where the households reported to hold an account are: Banco de Venezuela (39 per cent), Banco Bicentenario (12 per cent), Banco Provincial (10 per cent), Banesco (9.4 per cent), B.o d (8.2 per cent) and Mercantil (6.5 per cent)- see annex 10.

Figure 35: Percentage of households with a bank account. Total and by state.

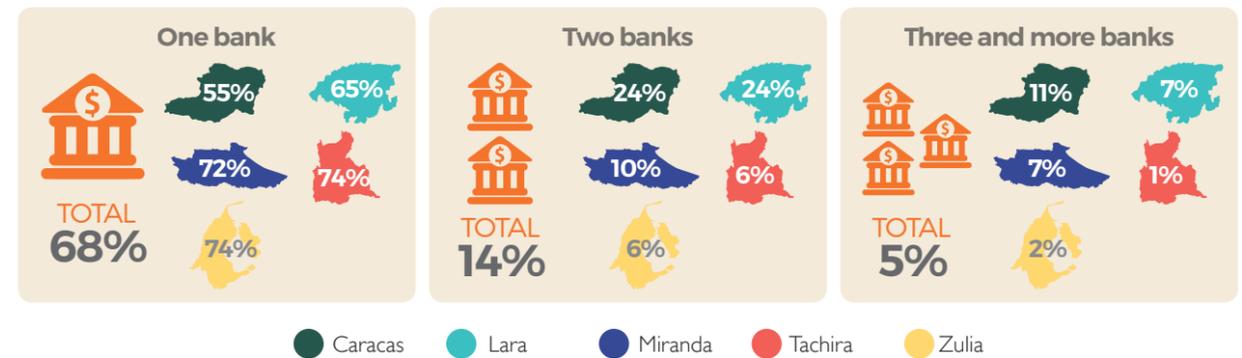


Source: Household survey

It is important to mention that 6 out of 7 household reports to have account in only one bank and 14 per cent in two banks. Caracas and Lara reported the highest percentage of households holding account

in two banks (24 per cent each). And Caracas have the higher percentage (11 per cent) holding accounts in three or more banks branches – see Figure 36.

Figure 36: Number of banks branches where household members hold an account. Total and by state.

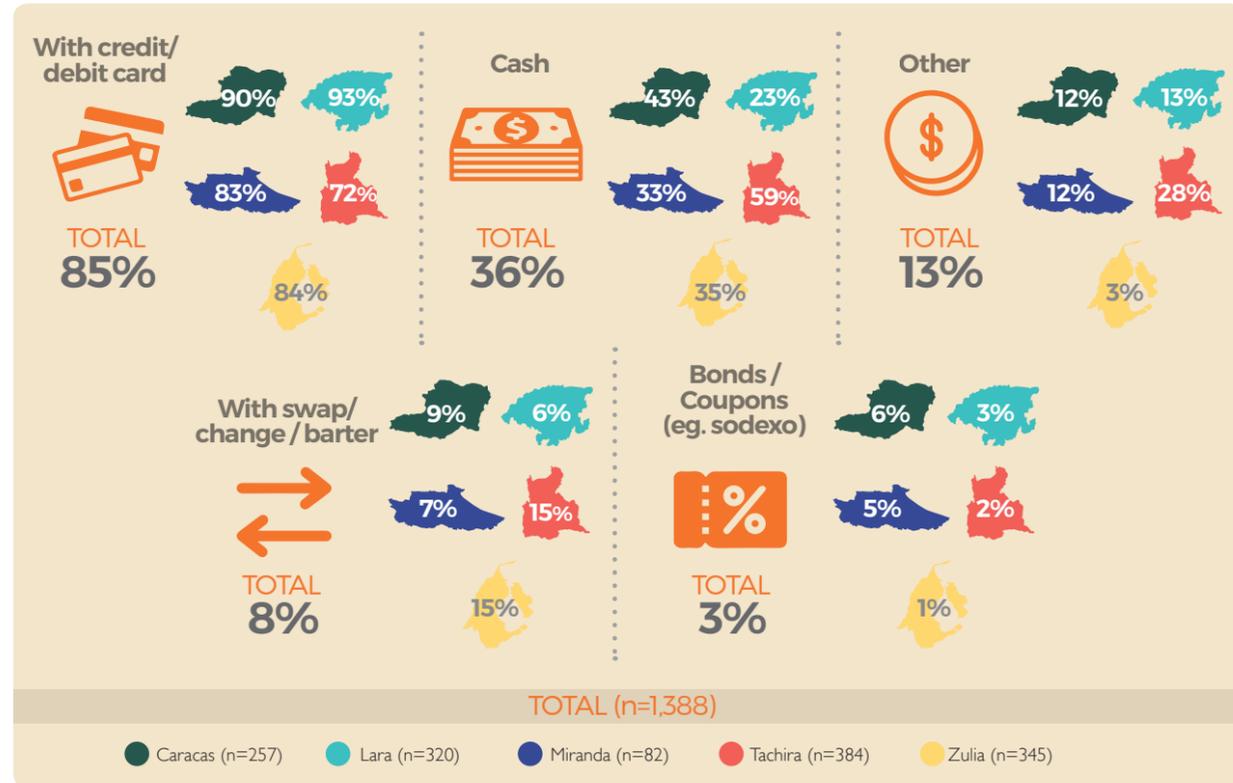


Source: Household survey

The 85 per cent of households report that the main way in which households make their payments in the local market is by credit/debit card. This result coincides with the information shared by community leaders regarding this question. The

second most used method is cash with 36 per cent, it is important to highlight the case of Táchira as the state with the highest participation in the use of cash to make payments, followed by Caracas with 43 per cent (see Figure 37).

Figure 37: Ways to do payments at local markets. Total and by state.



Source: Household survey

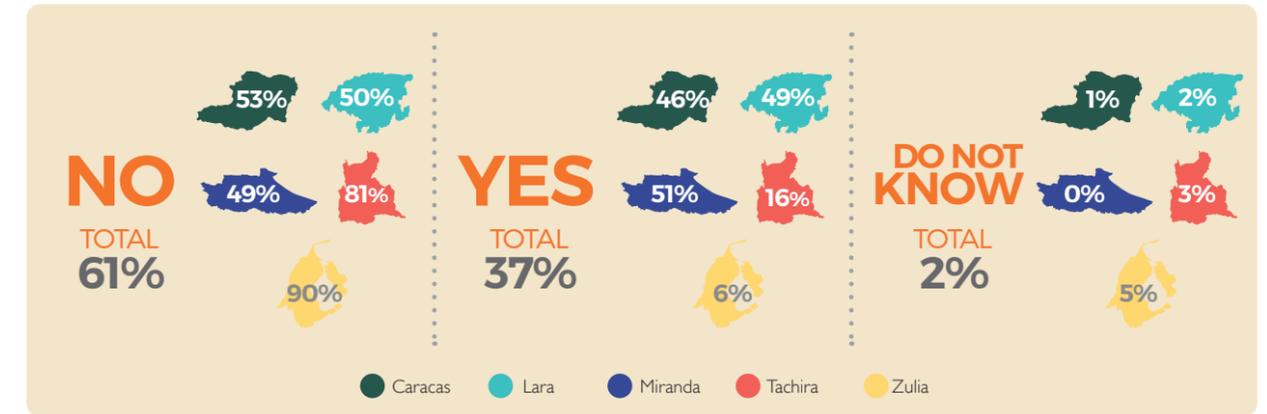
According to the information shared by community leaders, the most convenient way for households to receive money is through bank deposits, followed by the receipt of cash. In the case of Táchira, a preference is reported for the use of money-receiving agencies.

On the other hand, 37 per cent of households report having a mobile money account. And about 15 per cent use their mobile phones to access them. The states of Caracas, Lara and Miranda have the highest percentages of this type of account, close to 50 per cent. However, the states of Zulia and Táchira have the lowest percentages. In Zulia only 6 per cent of households report having a mobile money account, and in Táchira it is 16 per cent (see Figure 38).



Mitchelle Mitchell, World Vision LAC

Figure 38: Percentage of households with a mobile money account. Total and by state.



Source: Household survey

On average, households have about two mobile money accounts. This is higher in urban areas (1.9 accounts per household) vs rural areas (1.4 accounts per household) stands out. Miranda and Caracas report the highest amounts, with 2.1 and 1.8 mobile money accounts per household. In the case of Zulia, as expected, it is the State with the lowest average number of this type of accounts per household.

Those who reported using this type of account were asked what they use these accounts for, most of them reporting their use for buying food and paying for basic household services, receiving and transferring money, especially from Carnet de la Patria.

Table 20: Average number of mobile money accounts per household.

	Average
<b>Total</b>	1.8
<b>By zone of residence</b>	
Urban	1.9
Peri-Urban	1.6
Rural	1.4
<b>By State</b>	
Caracas	1.8
Lara	1.4
Miranda	2.1
Tachira	1.5
Zulia	1.2
<b>By Household size</b>	
One-headed household	1.1
Between 2 to 4 members	1.6
Between 5 to 8 members	1.7
9 members and more	2.9

Source: Household survey

Finally, the challenges faced while using the mobile money accounts are the lack of Internet connectivity (46 per cent), the lack of network coverage (44 per cent), and other challenges (32 per cent), and service interruption (22 per cent).

# CONCLUSIONS AND COMMUNITY RECOMMENDATIONS<sup>42</sup>

# VI



Alberto Galin, World Vision Venezuela Response Office

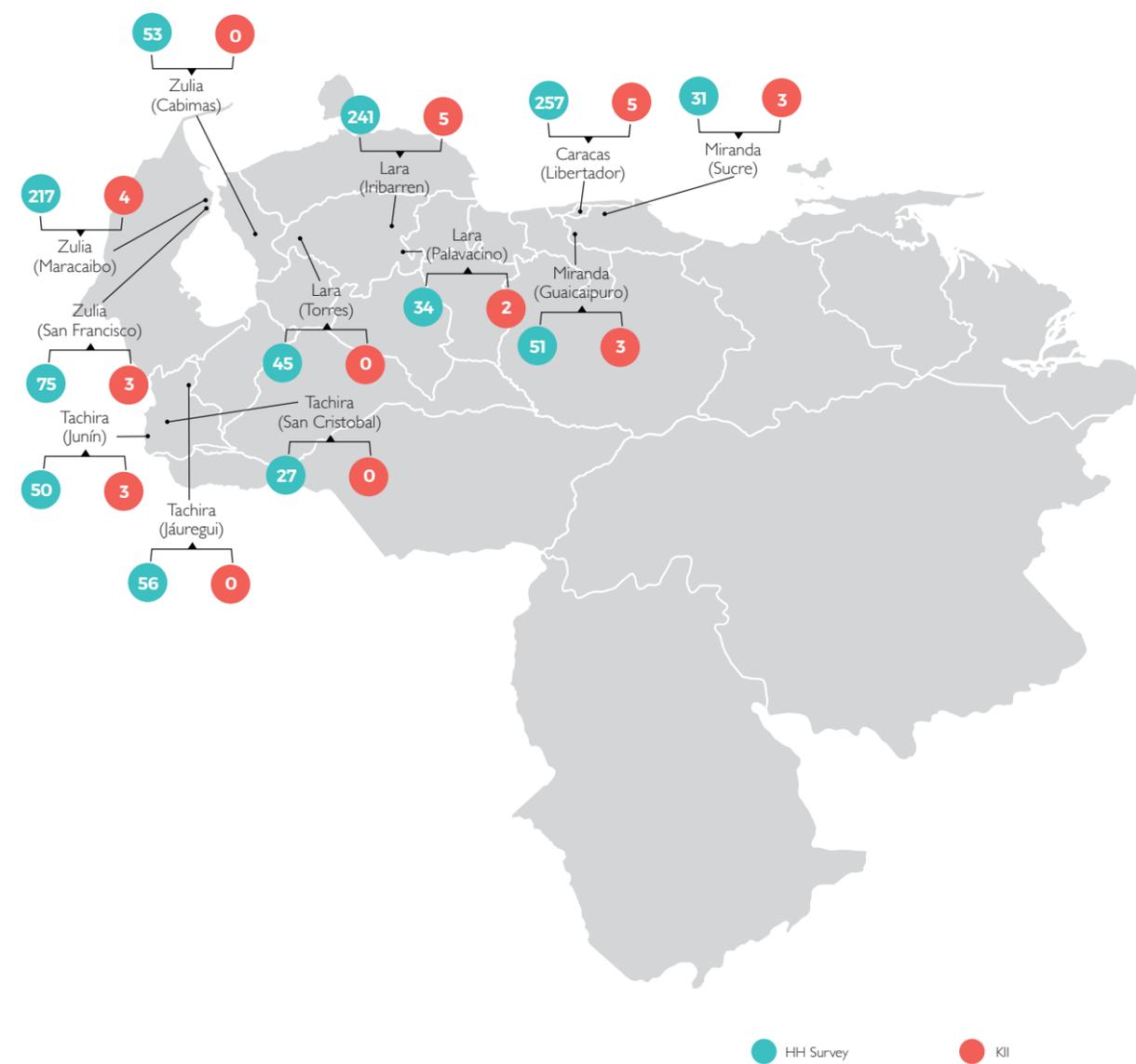
The following is a summary of the main problems identified and perceived solutions expressed by the community members consulted through the household surveys and key informants interviews.

Problems identified	Community recommendation	Sector/technical recommendations
<b>WASH</b> - Limited household access to water due to lack of infrastructure, poor quality of service and high costs	Promote actions to deliver aquatabs or water purification systems at household level, accompanied by training for their correct use.  At the community level, the establishment of safe water systems can be considered, which would allow the rehabilitation of points where the community used to obtain water. These actions can lead to the maintenance of existing water reserve tanks at community level and then filling them with potable water carried by tanker truck.	
<b>FSL</b> - High risk to food insecurity as food prices continue to rise, and employability conditions in communities are limited	Access to food through community kitchens and or direct delivery of food or vouchers to households to obtain.	Promotion of small-scale food production and livelihoods restoration rather than only food distributions.
<b>Roads &amp; Infrastructure:</b> The condition of roads and general infrastructure in communities limit households' access to quality livelihoods, to the extent that it offers limitations on access to markets and provides an inefficient quality of services. Roads & Infrastructure: The condition of roads and general infrastructure in communities limit households' access to quality livelihoods, to the extent that it offers limitations on access to markets and provides an inefficient quality of services.	Explore feasibility of delivering electricity generators to key points in the community, or repair electricity service infrastructure.  Repair access roads to the community.	Establishment of cash for work to rehabilitate infrastructure.
<b>Health-</b> Low quality of health services due to limited access to medicines, infrastructure damages and shortage of medical staff.	Create a community medicine fund.  Train health care workers.	
<b>Protection-</b> High perception of insecurity in the communities, especially due to the absence of safe spaces for children; as well as the lack of functioning state agencies to ensure the protection of the most vulnerable.  Existence of cases of unaccompanied children and children living without parents and close relatives.	Establish friendly and safe spaces in the communities especially for children and women, with a special focus on unaccompanied children living in the community.  Provide psychosocial counseling for children, parents.	Establish Child Friendly Spaces.  Promote Community support groups.  Support Foster families/carers with conditional cash transfer; Carry out hotspot mapping to identify risky areas and mitigation measures.
<b>Education-</b> High risk of student dropouts as schools have considerable damage to their infrastructure and teachers call strikes for non-payment	Repair school and promote learning spaces for teachers to guarantee access to proper infrastructure and materials.	Promote cash transfer to support to teachers and schools  Our interventions will focus both on the hardware and software, instead of just school rehabilitation
<b>Livelihoods:</b> lack of employment opportunities at community level that reduced the ability of households to meet their basic needs.	Promote the access to employment opportunities for household to be able to get food and pay for other key items.	Promotion of small-scale business, petty trade, and vocational training.  Establish short-term cash for work
<b>NFI-</b> Households have low coverage of their basic needs, including access to clothing and footwear, water storage tanks and buckets, among others.	Guarantee the access to non-food items such as: clothing, footwear, sleeping mats, hygiene products.	Establish saving & loan groups with savings and loans done in US \$ or with a commodity (coffee or rice) to cope with hyperinflation.
<b>Communication-</b> Limited connectivity to mobile and cell phone services		

<sup>42</sup> This section includes "community recommendations" based on the responses of Household survey and Key Informants Interviews. In addition of "technical recommendations" that suggest the way World Vision can offer a response to the main challenges faced by the communities following our programmatic agenda and scope of work during humanitarian responses.

## ANNEXES

## Annex I: Map of data collection areas



## Annex 2: Demographic profile

### Household Characteristics

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Sex</b>						
Men	23.2%	19.8%	23.9%	16.0%	25.8%	36.2%
Female	76.7%	80.2%	76.1%	84.0%	73.4%	63.6%
Other	0.1%	.0%	.0%	.0%	.8%	.2%
<b>Age groups</b>						
14-17 years	1.1%	2.7%	.0%	1.6%	1.0%	.0%
18-35 years	35.2%	46.7%	24.5%	39.7%	27.7%	35.1%
36-59 years	42.1%	37.7%	50.2%	36.2%	44.4%	44.4%
60 and more	21.7%	12.8%	25.2%	22.6%	26.9%	20.5%
<b>Household head</b>						
No	31.4%	31.5%	30.9%	30.0%	35.3%	31.8%
Yes	68.6%	68.5%	69.1%	70.0%	64.7%	68.2%
<b>Sex of household head</b>						
Men	46.4%	43.6%	40.5%	40.5%	52.2%	59.4%
Female	53.5%	56.4%	59.5%	59.5%	47.0%	40.4%
Other	0.1%	0%	0%	0%	0.8%	0.2%
<b>Relationship to household head</b>						
wife/husband	56.1%	58.0%	47.1%	57.1%	61.5%	59.9%
daughter/son	23.1%	19.8%	26.7%	20.8%	23.1%	25.2%
mother/father	9.6%	12.3%	11.5%	6.5%	8.2%	10.3%
mother/father in law	2.2%	1.2%	6.7%	.0%	1.9%	1.3%
other family (nephew/niece, uncle/aunt,cousin, etc.)	6.1%	7.4%	5.6%	9.1%	4.8%	1.6%
not family related	3.0%	1.2%	2.4%	6.5%	.5%	1.7%
<b>Household size (categories)</b>						
One-headed household	3.6%	5.4%	5.7%	.8%	4.2%	3.7%
Between 2 to 4 members	51.2%	48.6%	50.9%	49.4%	55.6%	54.1%
Between 5 to 8 members	38.5%	37.4%	37.6%	43.2%	36.1%	34.6%
9 members and more	6.6%	8.6%	5.8%	6.6%	4.1%	7.6%
<b>Distribution of household members by age groups</b>						
Less than 2 years old	7%	8%	5%	8%	4%	6%
Between 2 to 5 years	10%	12%	8%	10%	9%	10%
Between 6 to 17 years	24%	26%	25%	24%	22%	20%
Between 18 to 59 years	50%	48%	51%	47%	51%	52%

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
60 years and more	11%	6%	12%	10%	14%	11%
<b>Groups represented in the household</b>						
Household members with disabilities	19.0%	19.5%	20.2%	21.0%	11.3%	18.9%
Household members with serious chronic illnesses	32.0%	30.4%	39.2%	35.0%	26.6%	22.4%
Pregnant or lactating women	12.4%	23.3%	8.4%	14.8%	5.6%	7.2%
None	49.5%	41.6%	44.9%	43.6%	64.1%	63.3%
<b>Type of household</b>						
Host Household	97.2%	93.4%	100.0%	97.7%	99.8%	94.7%
Hosting IDP family	1.8%	2.3%	.0%	1.6%	.2%	5.1%
Returnee	0.7%	2.3%	.0%	.8%	.0%	.2%
IDP	0.3%	1.9%	.0%	.0%	.0%	.0%
<b>HH ownership</b>						
owned by HH	77.4%	72.8%	86.4%	63.4%	83.7%	89.8%
rented by HH	7.8%	9.3%	3.3%	10.9%	8.5%	6.2%
occupied without legal rights	12.5%	14.8%	8.5%	21.4%	6.6%	4.1%
refugee camp	0.1%	0.0%	0.3%	0.0%	0.0%	0.0%
self-settled (spontaneous) camp	0.3%	0.8%	0.3%	0.0%	1.0%	0.0%
Family home	1.8%	2.3%	1.3%	3.5%	0.2%	0.0%
Others	0.2%	0.0%	0.0%	0.8%	0.0%	0.0%

Note: all percentages are adjusted by expansion factor

Source: Household survey

### Population Movement

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Are you considering moving in another location?</b>						
No	93.8%	89.5%	90.0%	98.4%	95.4%	94.0%
Yes	6.2%	10.5%	10.0%	1.6%	4.6%	6.0%
¿Where? Colombia, other communities from the same State, migrate to a different State.						
<b>Reasons to move</b>						
acquire food	26.9%					
acquire medicines	19.9%					
work	37.2%					
take children to school	6.0%					
receive medical assistance	10.7%					
buy goods	11.3%					
visit relatives and friends	18.1%					
better services (ex. electricity/water)	32.4%					
For safety	19.7%					
others	24.2%					

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Do you often go to other countries?</b>						
No	88.0%	90.7%	92.7%	89.1%	72.8%	87.7%
Yes	12.0%	9.3%	7.3%	10.9%	27.2%	12.3%
<b>Where?</b>						
Colombia	88.0%	83.3%	100.0%	82.1%	91.4%	86.2%
Perú	1.4%	0%	0%	0%	2.5%	4.1%
Ecuador	0.8%	0%	0%	0%	3.1%	0%
Brasil	0.3%	0%	0%	0%	0%	1.6%
Others	9.4%	16.7%	0%	17.9%	3.1%	8.1%
<b>Reasons to travel</b>						
acquire food	61.8%	37.5%	48.3%	57.1%	88.3%	57.7%
acquire medicines	37.5%	16.7%	20.1%	32.1%	66.6%	31.1%
work	29.1%	20.8%	41.4%	32.1%	13.0%	45.1%
take children to school						
receive medical assistance	5.3%	4.2%	.0%	.0%	14.3%	4.9%
buy goods	6.2%	4.2%	3.5%	7.1%	8.1%	5.7%
visit relatives and friends	24.0%	37.5%	30.7%	17.9%	18.0%	27.4%
better services (ex. electricity/water)	4.1%	4.2%	.0%	.0%	7.4%	8.5%
For safety	2.3%	4.2%	.0%	.0%	5.5%	1.6%
others	1.5%	4.2%	.0%	.0%	1.3%	3.2%
<b>Compared to before the crisis, do you have more, the same or fewer people living in this household now?</b>						
More	10.3%	14.8%	3.0%	17.9%	7.5%	4.4%
Same	60.7%	54.9%	53.5%	63.4%	72.4%	63.2%
Fewer	27.3%	30.4%	43.4%	17.9%	20.2%	24.1%
Don't know	1.7%	0.0%	0.0%	0.8%	0.0%	8.3%
<b>If more, do you know where they come from?</b>						
Newborn members, relatives and friends coming from other State or country.						
<b>If fewer, where did they go?</b>						
Mainly emigration to countries from the regional and Europe, internal migration (few cases) and dead of relatives						
<i>Note: all percentages are adjusted by expansion factor</i>						

Source: Household survey

## Annex 3: Main problems identified

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Top 5 problems identified at community level</b>						
Top 1	Water	Food	Water	Water	Food	Water
	22.4%	22.2%	19.8%	31.3%	24.0%	26.7%
Top 2	Food	Roads & Infrastructure	Food	Food	Roads & Infrastructure	Food
	21.9%	15.3%	18.4%	22.8%	16.0%	23.4%
Top 3	Roads & Infrastructure	Water	Public Services	Roads & Infrastructure	Water	Health
	11.8%	13.8%	11.8%	14.2%	12.4%	13.3%
Top 4	Health	Health	Health	Health	Health	Sanitation
	10.5%	13.2%	11.3%	6.0%	11.1%	7.9%
Top 5	Public Services	Security & Protection	Roads & Infrastructure	Livelihoods	Public Services	Education
	6.1%	8.7%	10.7%	4.7%	8.4%	6.1%
<b>Analysis top 3 causes of identified problems</b>						
<b>Food</b>						
food too expensive	88.3%	85.5%	87.4%	89.3%	94.3%	86.4%
people are hungry	70.2%	77.2%	58.3%	73.6%	71.4%	70.5%
food distributions insufficient	37.5%	51.7%	25.0%	44.3%	39.0%	27.2%
<b>Water</b>						
insufficient for all household needs (cooking, washing, cleaning)	88.0%	91.1%	83.5%	99.0%	93.1%	70.1%
too expensive	36.7%	13.3%	37.4%	22.4%	2.6%	82.1%
water contaminated / not potable for drinking	25.3%	33.3%	12.6%	15.1%	8.5%	57.0%
<b>Health</b>						
insufficient medicines	69.7%	73.3%	55.6%	75.7%	82.1%	71.5%
increasing illness (fever, cough, flu, headache, infections, etc.)	59.8%	74.4%	60.7%	62.2%	58.6%	45.0%
insufficient qualified medical staff	52.5%	51.2%	36.1%	75.7%	55.6%	54.7%

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Roads &amp; Infrastructure</b>						
roads damaged, flooded, destroyed	78.2%	95.2%	63.7%	96.8%	45.1%	76.2%
lack of electricity	42.7%	21.4%	60.0%	25.8%	73.8%	48.5%
phone lines and other communications cut off	40.3%	36.9%	56.4%	41.9%	24.7%	37.2%
<b>Security &amp; Protection</b>						
theft	90.1%	85.5%	93.0%	100.0%	82.2%	88.4%
home invasion (armed or forced entry)	32.8%	36.4%	32.6%	38.4%	18.0%	33.6%
community conflicts	31.7%	40.0%	28.2%	38.4%	25.5%	20.5%
<b>Education</b>						
school building damaged, unsafe	47.4%	41.5%	50.7%	24.0%	40.2%	79.2%
children are not attending school (temporary)	44.4%	43.4%	46.8%	72.0%	40.3%	18.1%
teachers don't come to school, strikes	43.8%	58.5%	49.9%	52.0%	52.0%	8.9%
<b>Livelihoods</b>						
can't meet basic needs	91.4%	95.0%	96.0%	93.1%	80.4%	91.2%
no employment opportunities in or near community	47.5%	55.0%	45.1%	31.0%	61.6%	66.4%
poverty	45.9%	55.0%	39.6%	24.1%	61.6%	85.4%
<b>Analysis top 3 solutions of identified problems</b>						
<b>Food</b>						
aid: food distribution	76.3%	78.6%	53.0%	92.3%	65.8%	56.4%
aid: special nutrition for children, mothers	66.2%	74.6%	40.1%	80.3%	56.4%	42.9%
aid: ready to eat meals	54.3%	59.5%	18.9%	87.2%	18.5%	15.6%
<b>Water</b>						
water aid	64.7%	76.4%	29.3%	79.4%	50.2%	64.3%
water purification tablets or system	37.7%	65.2%	12.6%	32.5%	30.5%	61.2%
repair current water source:	28.6%	40.4%	49.4%	18.8%	52.5%	9.3%

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Health</b>						
more doctors, nurses	65.7%	71.6%	40.4%	68.8%	76.3%	70.0%
train health care workers	54.7%	66.7%	16.8%	75.0%	59.0%	47.0%
create village drug fund	48.6%	58.8%	42.2%	31.2%	52.6%	51.0%
<b>Roads &amp; Infrastructure</b>						
build, repair roads	61.8%	82.5%	37.3%	100.0%	49.8%	43.0%
install, repair electricity	48.4%	31.2%	33.3%	46.8%	73.2%	51.7%
build, repair drainage	30.6%	23.7%	23.0%	21.3%	40.0%	42.4%
<b>Security &amp; Protection</b>						
safe area for children to play	66.8%	69.0%	35.9%	82.4%	80.1%	56.8%
psycho-social counseling for children, parents	44.9%	65.5%	26.1%	17.6%	72.4%	29.8%
reunification with families	39.9%	59.8%	35.9%	5.9%	51.2%	39.8%
<b>Education</b>						
repair school	64.3%	74.6%	58.3%	11.1%	79.0%	78.5%
more trained teachers	58.4%	58.7%	48.5%	50.0%	73.6%	59.5%
govt. pays teachers	53.6%	61.9%	47.6%	88.9%	70.3%	18.7%
<b>Livelihoods</b>						
daily labor for pay, food	56.9%	71.8%	67.9%	66.7%	78.0%	35.7%
employment, jobs	45.3%	59.1%	26.2%	19.4%	35.3%	60.0%
support from relatives/friends	18.1%	30.0%	17.2%	19.4%	39.6%	6.9%
<b>Basic Needs (NFIs)</b>						
clothing or footwear	81.4%	75.0%	100.0%	N.A.	65.1%	86.1%
sleeping mats or mattresses	61.9%	62.5%	39.7%	N.A.	79.8%	72.3%
soap, toothbrushes, feminine hygiene products, other personal care items	58.6%	81.3%	9.9%	N.A.	84.9%	46.5%

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Activities, abilities or resources that could contribute than household members support community recuperation from the crisis</b>						
manual labour (cleaning, digging, tilling, etc.)	53.4%	62.6%	49.8%	51.0%	50.2%	55.4%
cooking for labourers or others	33.6%	41.2%	41.7%	31.1%	22.7%	27.3%
care for children	29.7%	46.3%	17.1%	40.9%	21.3%	16.4%
potable water	23.9%	31.1%	29.8%	17.9%	25.4%	18.6%
food donation	23.5%	30.0%	22.8%	17.9%	29.3%	24.1%

Note: all percentages are adjusted by expansion factor

Source: Household survey

## Annex 4: Protection

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Situations happened in the community</b>						
theft	62.6%	73.9%	51.3%	55.6%	64.1%	77.5%
community conflicts	38.8%	57.6%	20.4%	44.0%	30.7%	41.3%
home invasion (armed or forced entry)	28.3%	38.9%	23.8%	33.1%	14.5%	25.3%
armed violence (gun fire, shelling, etc.)	28.1%	42.0%	21.9%	33.9%	18.8%	19.3%
physical assault	20.0%	33.9%	10.5%	24.9%	17.0%	12.6%
severely distressed (have trouble sleeping, eating, concentrating or suicidal thoughts, etc.)	19.0%	32.3%	13.0%	26.5%	18.3%	1.8%
health risks (epidemics, household poisons, etc)	17.9%	27.6%	14.6%	23.3%	14.0%	6.3%
gang activity	17.5%	27.6%	9.2%	19.8%	15.4%	16.1%
no threats	16.9%	6.6%	26.9%	16.3%	18.8%	13.6%
discrimination	15.4%	23.0%	6.6%	21.8%	14.4%	9.0%
safety hazards (open well, debris, rusty nails, etc.)	14.4%	21.4%	5.8%	24.5%	13.4%	2.0%
environmental risks (toxic spill, landslides, etc.)	13.5%	20.6%	13.1%	12.8%	13.2%	8.7%
intimidation, abuse	10.8%	18.7%	5.2%	16.7%	2.4%	6.2%
exploitation (children in dangerous work, sexual exploitation, early marriage, trafficking, etc)	8.7%	20.6%	3.7%	12.5%	2.5%	1.7%
sexual assault	6.4%	11.3%	7.4%	6.6%	.5%	3.7%
abduction, kidnapping	4.4%	13.2%	2.7%	2.3%	.7%	4.1%
other threat:	2.2%	.4%	2.1%	2.7%	7.1%	.2%

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Most vulnerable population groups</b>						
Children separated from their parents and/or relatives	36.6%	43.2%	38.9%	26.5%	35.3%	45.6%
Children who drop out from schools	32.7%	38.5%	25.8%	33.5%	27.7%	38.3%
Female-headed households	32.6%	42.8%	38.5%	38.1%	22.7%	11.9%
Family with more than 6 children	31.1%	41.2%	25.9%	35.8%	38.1%	15.2%
Children under the care of sick/elderly caregiver	29.0%	24.9%	26.3%	23.0%	45.9%	35.3%
Orphans without the care of relatives	25.4%	19.1%	19.7%	25.3%	22.0%	41.4%
Youth involved in gang activities	23.6%	29.6%	18.1%	22.2%	28.0%	24.4%
Orphans with the care of relatives	22.9%	24.5%	24.1%	25.3%	19.6%	17.7%
Children working in causal labour	14.3%	21.8%	10.4%	16.7%	11.8%	9.7%
Single-headed households	9.1%	17.9%	6.6%	8.9%	7.6%	5.3%
Family with debts in the past 6 months	7.6%	10.9%	2.0%	13.6%	6.6%	2.1%
Family who has missing/detained members	6.7%	9.3%	4.1%	7.0%	1.7%	10.3%
Family who are constantly on the move	4.7%	11.7%	1.0%	4.7%	3.2%	3.9%
None	4.6%	1.9%	4.3%	8.6%	2.2%	2.3%
Individuals who do not have legal documents	4.5%	11.3%	1.5%	5.1%	.8%	3.3%
Elderly people alone, abandoned and/or sick	2.2%	.0%	7.9%	.0%	3.1%	.0%
Other	1.6%	1.9%	4.7%	.0%	.7%	.4%
<b>Services community member may seek for support in case of abuse, neglect, violence or exploitation</b>						
<b>Relatives/Trusted friends</b>						
yes	76.5%	84.0%	81.6%	80.2%	63.1%	65.3%
no,not helpful	13.3%	7.0%	10.4%	12.5%	28.2%	14.8%
no,not available	10.2%	8.9%	8.0%	7.4%	8.6%	19.9%
<b>Religious services</b>						
yes	70.7%	61.5%	88.4%	64.2%	69.5%	68.1%
no,not helpful	20.8%	26.1%	8.1%	28.0%	18.0%	21.6%
no,not available	8.6%	12.5%	3.5%	7.8%	12.5%	10.3%
<b>Health services</b>						
yes	63.0%	61.5%	75.9%	66.9%	43.6%	53.9%
no,not helpful	21.3%	17.5%	14.6%	19.8%	33.4%	28.2%
no,not available	15.7%	21.0%	9.5%	13.2%	23.0%	17.9%
<b>School/Teachers</b>						
yes	61.4%	73.9%	66.9%	62.7%	56.6%	43.2%
no,not helpful	26.9%	18.7%	23.6%	21.8%	28.7%	47.0%
no,not available	11.6%	7.4%	9.5%	15.6%	14.7%	9.8%

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Police</b>						
yes	56.9%	47.9%	57.5%	57.2%	63.0%	60.0%
no,not helpful	32.7%	34.6%	32.7%	33.1%	35.4%	28.4%
no,not available	10.4%	17.5%	9.8%	9.7%	1.5%	11.6%
<b>Community Leaders</b>						
yes	55.2%	52.1%	61.3%	62.3%	52.6%	39.5%
no,not helpful	32.5%	34.2%	29.3%	24.1%	33.7%	49.0%
no,not available	12.3%	13.6%	9.5%	13.6%	13.7%	11.5%
<b>Social Welfare Department</b>						
yes	38.8%	51.4%	27.4%	45.5%	54.3%	19.3%
no,not helpful	21.2%	19.5%	21.5%	14.8%	27.0%	29.9%
no,not available	40.0%	29.2%	51.1%	39.7%	18.7%	50.8%
<b>Safe spaces for children</b>						
yes	34.1%	40.5%	33.3%	47.9%	24.3%	11.7%
no,not helpful	10.9%	6.6%	18.9%	3.1%	15.9%	14.4%
no,not available	55.1%	52.9%	47.8%	49.0%	59.8%	73.9%
<b>Community protection group</b>						
yes	32.2%	43.6%	34.4%	33.9%	35.4%	13.5%
no,not helpful	25.3%	21.0%	27.0%	16.7%	34.8%	35.4%
no,not available	42.5%	35.4%	38.6%	49.4%	29.8%	51.1%
<b>Safe spaces for women</b>						
yes	26.4%	26.5%	26.1%	41.6%	18.6%	5.5%
no,not helpful	10.2%	4.7%	17.4%	3.1%	15.9%	14.7%
no,not available	63.4%	68.9%	56.6%	55.2%	65.5%	79.8%
<b>Orphanage/care centers</b>						
yes	13.6%	14.8%	18.9%	17.5%	8.1%	2.2%
no,not helpful	15.3%	8.6%	20.6%	7.4%	28.1%	19.7%
no,not available	71.2%	76.7%	60.5%	75.1%	63.8%	78.1%

Note: all percentages are adjusted by expansion factor

Source: Household survey

## Annex 5: Non-food items

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Coverage of Non-food items</b>						
<b>Clothing and footwear</b>						
fully	13.8%	18.7%	8.5%	21.8%	4.4%	8.6%
partially	45.1%	48.2%	63.9%	30.3%	55.8%	35.6%
not at all	40.9%	32.7%	27.6%	47.9%	39.6%	55.3%
<b>Jerry cans or other water storage containers</b>						
fully	24.9%	32.7%	34.0%	19.8%	19.5%	17.7%
partially	30.3%	21.0%	46.5%	19.1%	34.3%	34.8%
not at all	44.6%	45.5%	19.5%	61.1%	46.1%	47.5%
<b>Buckets</b>						
fully	28.6%	45.9%	27.2%	30.4%	16.0%	19.3%
partially	42.9%	35.8%	51.0%	37.3%	60.0%	37.3%
not at all	28.4%	18.3%	21.8%	32.3%	23.8%	43.2%
<b>Sleeping mats or mattresses</b>						
fully	36.0%	51.0%	32.0%	39.3%	34.8%	21.7%
partially	40.9%	35.4%	49.1%	40.1%	48.9%	31.4%
not at all	23.1%	13.6%	19.0%	20.6%	16.3%	46.7%
<b>Blankets</b>						
fully	40.7%	55.3%	32.1%	50.2%	39.7%	22.4%
partially	38.3%	31.5%	51.1%	31.5%	48.4%	33.0%
not at all	20.8%	12.5%	16.8%	18.3%	11.8%	44.4%
<b>Soap, toothbrushes, feminine hygiene products, other personal care items</b>						
fully	37.7%	50.2%	29.0%	41.6%	32.6%	34.0%
partially	48.2%	40.9%	61.5%	33.8%	64.7%	51.5%
not at all	14.0%	8.9%	9.5%	24.5%	2.7%	14.4%
<b>Cooking pots, utensils, plates, cups, etc</b>						
fully	40.2%	52.5%	41.2%	42.4%	36.7%	25.3%
partially	40.6%	38.1%	46.9%	40.1%	46.4%	31.8%
not at all	19.2%	9.3%	11.9%	17.5%	16.6%	42.9%
<b>Cooking equipment (stove, etc.)</b>						
fully	45.0%	58.4%	37.4%	53.7%	33.4%	34.7%
partially	33.1%	27.6%	46.5%	24.9%	46.8%	25.5%
not at all	21.8%	13.6%	16.0%	21.4%	19.7%	39.7%
<b>Cooking fuel</b>						
fully	37.4%	55.5%	22.0%	47.4%	4.4%	45.3%
partially	45.1%	34.0%	50.5%	31.4%	82.8%	46.8%
not at all	17.4%	10.5%	27.5%	21.2%	12.3%	7.7%

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Type of equipment needed for cooking</b>						
gas stove	76.4%	87.9%	80.8%	78.1%	60.6%	72.5%
electric stove	7.5%	6.5%	5.6%	3.4%	25.9%	3.0%
grate	2.0%	.0%	.0%	.0%	5.1%	5.8%
<b>Type of fuel needed for cooking</b>						
kerosene	0.2%	.0%	.4%	.0%	.3%	.0%
bottled gas	82.7%	90.4%	85.5%	92.7%	76.3%	85.2%
wood	4.4%	.0%	8.7%	.0%	5.4%	.0%
electricity	10.1%	5.2%	4.5%	7.3%	17.4%	5.4%
Other	2.6%	4.3%	.8%	.0%	.8%	9.4%
<b>Is every member of your household currently sleeping under a mosquito net?</b>						
all	2.1%	1.9%	2.5%	1.6%	2.5%	2.5%
some	7.8%	10.9%	9.8%	7.4%	8.1%	2.7%
none	89.7%	86.4%	87.7%	90.3%	89.4%	94.8%
do not know	0.4%	.8%	.0%	.8%	.0%	.0%

Note: all percentages are adjusted by expansion factor

Source: Household survey

## Annex 6: Livelihoods

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Ways your household usually earns income or meets basic needs</b>						
formal salary, wages	40.9%	35.8%	36.0%	48.6%	45.9%	35.8%
casual (daily) labour	33.0%	35.8%	31.9%	17.5%	37.0%	55.6%
trade (contractor/builder, artisan, shoe maker, etc.)	28.0%	36.2%	30.4%	23.3%	28.7%	24.3%
pension fund	26.0%	16.3%	34.9%	30.4%	25.0%	17.0%
aid, welfare	11.3%	13.2%	15.8%	12.5%	2.9%	7.3%
petty trade (importing/selling goods, making/selling arepas,perro caliente, chicha, empanada etc.)	10.0%	10.5%	11.8%	6.6%	13.1%	11.1%
food or other aid	9.8%	17.1%	3.1%	17.5%	4.4%	2.0%
remittances	7.6%	8.6%	15.2%	3.1%	6.1%	5.4%
small business (tienda, miscelanea, etc)	6.2%	7.8%	3.2%	3.5%	14.9%	7.2%
sharing/borrowing food, HH items	4.2%	10.1%	.5%	7.8%	.0%	.0%
Government AID	4.2%	2.3%	11.9%	3.1%	.0%	.5%
no livelihood activities	2.3%	4.3%	1.0%	3.5%	1.4%	.9%

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
other livelihood:	1.8%	1.6%	2.5%	2.7%	.3%	.5%
savings	1.7%	3.9%	.3%	2.7%	.3%	.4%
crop production, sales	1.2%	1.2%	1.5%	.0%	5.1%	.2%
subsistence farming	1.2%	1.2%	2.9%	.0%	2.0%	.2%
income from rental	1.1%	.8%	1.0%	1.9%	.2%	.5%
sale of fish	0.3%	.4%	.0%	.0%	.0%	1.0%
begging	0.2%	.4%	.8%	.0%	.0%	.0%
loans, credit, debt	0.2%	1.2%	.0%	.0%	.2%	.0%
livestock production, sales	0.2%	.4%	.5%	.0%	.2%	.0%
<b>Activities households are doing to earn income /meet basic needs since the crisis</b>						
casual (daily) labour	33.9%	34.2%	26.1%	21.0%	40.7%	61.1%
formal salary, wages	30.9%	24.5%	18.7%	37.7%	37.5%	36.9%
trade (contractor/builder, artisan, shoe maker, etc.)	24.9%	33.1%	22.2%	21.4%	29.3%	23.6%
pension fund	21.0%	13.6%	19.4%	28.8%	19.8%	17.7%
petty trade (importing/selling goods, making/selling arepas,perro caliente, chicha, empanada etc.)	12.5%	12.1%	13.5%	10.9%	17.8%	10.8%
aid, welfare	11.7%	10.9%	16.3%	13.6%	4.3%	8.1%
no livelihood activities	11.1%	11.3%	26.6%	7.4%	6.6%	.0%
remittances	8.1%	7.4%	11.3%	7.0%	9.3%	5.4%
food or other aid	7.5%	14.8%	1.7%	13.2%	2.7%	1.2%
small business (tienda, miscelanea, etc)	6.1%	10.1%	2.5%	3.5%	13.1%	7.0%
sharing/borrowing food, HH items	4.2%	8.9%	.3%	8.6%	.0%	.0%
Government AID	4.0%	1.2%	12.4%	3.1%	.0%	.0%
other livelihood:	1.7%	1.9%	1.8%	2.7%	1.0%	.0%
subsistence farming	1.3%	.4%	2.0%	.8%	2.5%	1.2%
crop production, sales	1.2%	.8%	1.3%	.0%	5.4%	.6%
savings	0.9%	1.2%	.3%	1.9%	.2%	.2%
income from rental	0.8%	.8%	.3%	1.9%	.0%	.0%
loans, credit, debt	0.4%	1.2%	.3%	.0%	.2%	.5%
sale of fish	0.3%	.4%	.0%	.0%	.0%	1.0%
livestock production, sales	0.2%	.4%	.3%	.0%	.5%	.0%
begging	0.1%	.4%	.0%	.0%	.0%	.0%

Note: all percentages are adjusted by expansion factor

Source: Household survey

## Annex 7: Humanitarian Accountability

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Language</b>						
Spanish	99.7%	100%	100%	99.2%	99.8%	100%
Others	0.3%	0%	0%	0.8%	0.2%	0%
<b>Quantity of people (adults &amp; school-aged children) in HH that can read in their preferred language</b>						
Everyone	88.8%	82.9%	95.3%	86.8%	82.3%	93.9%
more than half	8.8%	14.0%	3.8%	10.5%	13.4%	4.4%
about half	1.2%	1.9%	.5%	.8%	3.2%	.5%
less than half	1.1%	1.2%	.5%	1.9%	1.2%	.5%
no one	0.1%	.0%	.0%	.0%	.0%	.6%
<b>Have you been receiving enough information about the crisis and available services?</b>						
no	33.5%	37.0%	32.2%	24.5%	28.3%	51.0%
yes	61.2%	57.2%	65.0%	67.3%	62.8%	48.6%
do not know	5.2%	5.8%	2.7%	8.2%	8.9%	.4%
<b>Preferences to receive information</b>						
Face to face with NGO staff	56.8%	54.9%	45.2%	69.7%	39.8%	63.6%
community meetings	50.1%	48.2%	36.2%	65.0%	41.7%	50.0%
Social media (FB, Instagram, Twitter)	29.8%	35.8%	25.5%	31.5%	39.5%	20.4%
whatsapp	24.1%	26.1%	17.8%	32.3%	22.6%	17.4%
church, mosque, temple	22.8%	23.7%	31.0%	30.7%	3.6%	10.5%
print materials (such as leaflets)	22.4%	27.2%	16.0%	35.0%	5.4%	15.6%
public notice board	20.9%	23.7%	11.7%	38.5%	10.7%	7.1%
SMS (text message to agency staff)	18.7%	22.6%	12.1%	26.1%	4.4%	20.8%
banners/posters	17.8%	21.8%	10.4%	16.7%	11.8%	9.7%
local government authority	15.7%	19.5%	17.4%	19.5%	6.5%	9.6%
Radio/TV	5.9%	3.9%	17.3%	.8%	7.1%	.8%
Other	3.0%	1.9%	5.3%	2.7%	3.7%	1.1%

Note: all percentages are adjusted by expansion factor

Source: Household survey

## Annex 8: Digital Literacy

### Access to cellphones

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Uses given to mobile phones</b>						
Communication (place and receive voice calls)	79.9%	76.7%	81.7%	79.4%	89.0%	75.6%
Transmit and receive information (text, videos, documents etc.)	32.7%	35.0%	18.8%	35.0%	45.8%	36.1%
Download information from the web	25.0%	26.1%	20.5%	23.7%	28.7%	29.5%
Mobile banking	23.6%	27.6%	35.4%	24.9%	11.6%	10.3%
<b>Do not have mobile phone</b>	<b>16.9%</b>	<b>20.6%</b>	<b>19.1%</b>	<b>17.9%</b>	<b>9.6%</b>	<b>13.7%</b>
Conduct business	15.2%	16.3%	16.8%	7.0%	6.6%	31.9%
Mobile money accounts	14.7%	19.8%	25.4%	11.7%	9.9%	4.0%
Watch videos	13.6%	22.6%	7.5%	18.3%	14.8%	3.9%
Play games	13.2%	18.3%	4.4%	19.1%	9.0%	12.8%
Sending and receiving money	12.7%	14.4%	16.9%	6.2%	4.9%	21.7%
Others	1.9%	.0%	1.3%	4.7%	.9%	.2%
<b>Most common apps used in mobile phones</b>						
Whatsapp	62.2%	52.1%	55.3%	56.0%	76.6%	81.6%
Facebook	45.1%	45.9%	46.7%	35.4%	52.6%	53.9%
Google	30.2%	38.1%	21.8%	29.6%	39.8%	28.3%
Instagram	24.5%	27.6%	15.3%	20.6%	30.0%	36.6%
None	22.8%	31.9%	23.8%	25.7%	15.0%	13.2%
Games	11.4%	19.8%	2.0%	14.4%	10.5%	10.9%
<b>Have a basic phone</b>	<b>11.4%</b>	<b>10.5%</b>	<b>15.1%</b>	<b>17.5%</b>	<b>5.3%</b>	<b>.7%</b>
Twitter	10.5%	12.1%	4.3%	8.9%	17.5%	15.0%
Others	1.2%	2.3%	1.7%	.0%	1.8%	.9%
pinterest	0.6%	1.2%	.0%	.8%	1.5%	.0%
<b>Challenges faced while using mobile phones</b>						
No network coverage	66.2%	52.9%	68.3%	56.8%	80.7%	82.5%
Poor internet connectivity	51.1%	44.4%	49.0%	46.3%	70.0%	55.8%
Inadequate funds to purchase air time & data bundles	30.9%	26.8%	33.5%	32.3%	31.6%	28.5%
Poor access to power for charging phone (s)	20.6%	8.2%	19.3%	8.9%	66.5%	23.5%
Inadequate digital literacy	6.8%	6.2%	6.4%	10.5%	5.1%	2.7%

Note: all percentages are adjusted by expansion factor

Source: Household survey

## Financial inclusion

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>% of households with a bank account</b>						
No	8.9%	8.9%	2.5%	7.0%	18.3%	14.1%
Yes	89.7%	89.9%	97.0%	92.2%	80.4%	81.7%
Do not know	1.4%	1.2%	.5%	.8%	1.4%	4.1%
<b>Ways to do payments at local markets</b>						
with credit / debit card	85.1%	89.9%	92.6%	82.9%	71.6%	83.6%
Cash	35.6%	42.8%	22.6%	32.7%	59.2%	34.9%
Other	12.6%	12.1%	12.7%	12.5%	28.1%	2.7%
with swap / change / barter	7.8%	8.9%	6.0%	7.4%	.7%	14.6%
bonds / coupons (eg. sodexo)	3.4%	5.8%	2.5%	4.7%	1.9%	.9%
<i>Otras opciones: pagos móviles y uso de divisas</i>						
<b>% of households with a mobile money account</b>						
No	60.9%	52.5%	49.7%	49.4%	81.3%	89.8%
Yes	37.4%	46.3%	48.8%	50.6%	16.1%	5.6%
Do not know	1.7%	1.2%	1.5%	.0%	2.6%	4.6%
<b>Note: all percentages are adjusted by expansion factor</b>						

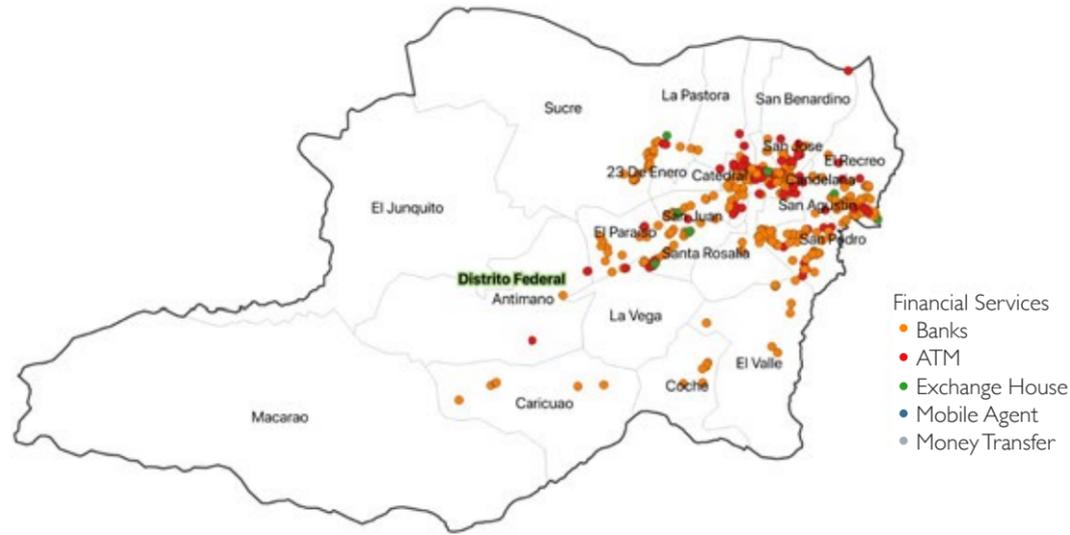
	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
<b>Quantity of banks where household have accounts</b>						
Count	26	20	21	12	13	16
<b>Number of banks where household have accounts</b>						
One bank	68%	55%	65%	72%	74%	74%
Two banks	14%	24%	24%	10%	6%	6%
Three banks	4%	9%	5%	6%	1%	1%
Four banks	1%	2%	1%	1%	1%	0%
Five banks	0%	0%	0%	0%	0%	0%
Six banks	0%	0%	0%	0%	0%	0%
Does not have bank account	11%	9%	3%	7%	17%	15%
Do not know	2%	1%	1%	1%	1%	3%
Missing value	0%	0%	0%	1%	0%	0%
Do not answer	0%	0%	0%	1%	0%	0%
<b>List of banks where household have accounts</b>						
Banco de Venezuela	38.7%	43.6%	35.5%	40.4%	53.1%	21.7%
Banco Bicentenario	12.1%	6.4%	19.2%	10.6%	13.7%	7.3%
Banco Provincial	9.5%	7.8%	12.1%	6.4%	13.4%	4.5%
Banesco	9.4%	15.4%	5.3%	14.9%	4.4%	12.1%
B.o d	8.2%	1.7%	2.3%	1.1%	0.3%	34.4%
Mercantil	6.5%	8.1%	7.8%	10.6%	4.1%	4.1%

	Total (n=1,388)	Caracas (n=257)	Lara (n=320)	Miranda (n=82)	Tachira (n=384)	Zulia (n=345)
Banco del Tesoro	2.9%	2.8%	5.3%	2.1%	0.9%	2.2%
Banco Fondo Común	2.4%	3.4%	0.7%	5.3%	1.5%	3.8%
BNC	1.7%	0.8%	4.3%	1.1%	0.6%	0.6%
Banco nacional de crédito.	1.6%	1.1%	3.4%	2.1%	0.0%	1.0%
Banco occidental de descuento	1.6%	0.0%	1.1%	0.0%	0.0%	6.1%
Sofitasa	1.6%	0.0%	0.2%	0.0%	6.7%	0.3%
Banco Exterior	0.9%	2.0%	0.9%	3.2%	0.0%	0.0%
Bancaribe	0.6%	0.8%	0.2%	0.0%	0.9%	0.6%
100% Banco	0.5%	1.7%	0.2%	0.0%	0.3%	0.0%
Bancaribe	0.5%	1.4%	0.2%	0.0%	0.0%	0.6%
Banco Fondo Común (BFC)	0.4%	1.1%	0.0%	2.1%	0.0%	0.0%
Ban plus	0.3%	0.6%	0.2%	0.0%	0.0%	0.3%
Banco Caroní	0.1%	0.3%	0.0%	0.0%	0.3%	0.0%
Banco Activo	0.1%	0.3%	0.2%	0.0%	0.0%	0.0%
Banco Plaza	0.1%	0.6%	0.0%	0.0%	0.0%	0.0%
Banca privada	0.1%	0.0%	0.2%	0.0%	0.0%	0.0%
Bancamiga	0.1%	0.3%	0.0%	0.0%	0.0%	0.0%
Banco activo	0.1%	0.0%	0.2%	0.0%	0.0%	0.0%
Banco del sur	0.1%	0.0%	0.0%	0.0%	0.0%	0.3%
Banco de la Fuerza Armada Nacional Bolivariana (BANFANB)	0.1%	0.0%	0.2%	0.0%	0.0%	0.0%

Source: Household survey

### Annex 9: Geographical presence of banks and other financial services

#### Caracas



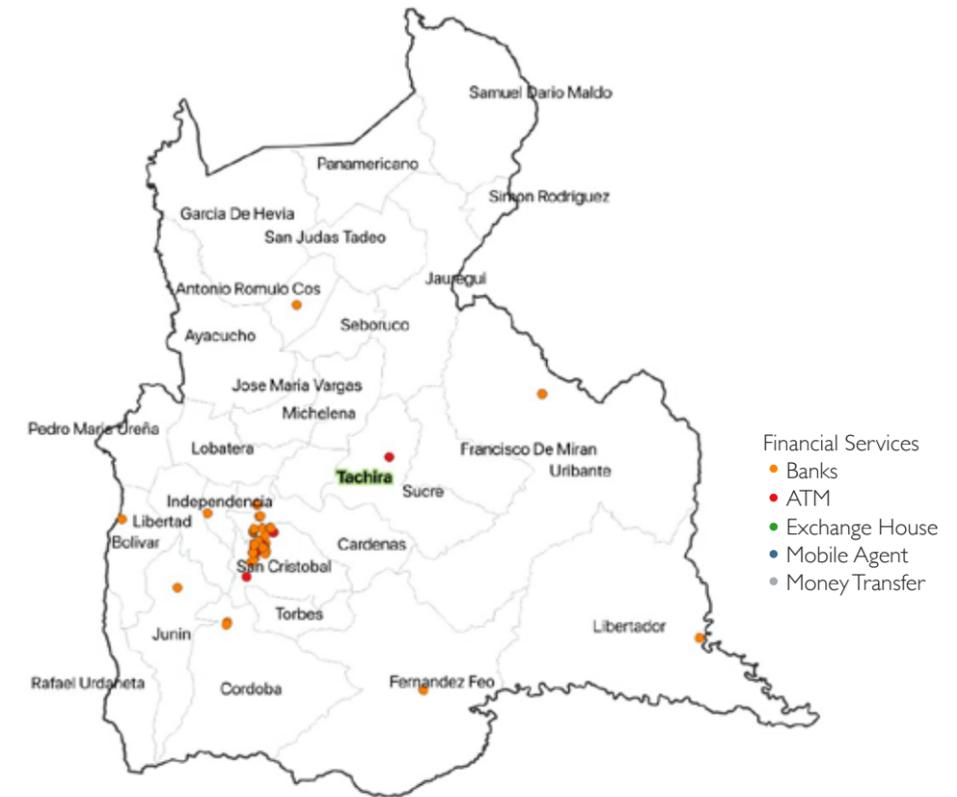
#### Lara



#### Miranda



#### Tachira



## Zulia



## Annex 10: Presence of banks by State

Name of bank	Caracas	Lara	Miranda	Tachira	Zulia
Banco de Venezuela	⊕	⊕	⊕	⊕	⊕
Banco Bicentenario	⊕	⊕	⊕	⊕	⊕
Banco Provincial	⊕	⊕	⊕	⊕	⊕
Banesco	⊕	⊕	⊕	⊕	⊕
B.o d	⊕	⊕	⊕	⊕	⊕
Mercantil	⊕	⊕	⊕	⊕	⊕
Banco del Tesoro	⊕	⊕	⊕	⊕	⊕
Banco Fondo Común	⊕	⊕	⊕	⊕	⊕
BNC	⊕	⊕	⊕	⊕	⊕
Banco nacional de crédito.	⊕	⊕	⊕		⊕
Banco occidental de descuento		⊕			⊕
Sofitasa		⊕		⊕	⊕
Banco Exterior	⊕	⊕	⊕		
Bancaribe	⊕	⊕			⊕
100% Banco	⊕	⊕		⊕	
Bancaribe	⊕	⊕			⊕
Banco Fondo Común (BFC)	⊕		⊕		
Ban plus	⊕	⊕			⊕
Banco Caroní	⊕			⊕	
Banco Activo	⊕	⊕			
Banco Plaza	⊕				
Banca privada		⊕			
Bancamiga	⊕				
Banco activo		⊕			
Banco del sur					⊕
Banco de la Fuerza Armada Nacional Bolivariana (BANFANB)		⊕			

Source: Household survey



Mishelle Mitchell, World Vision LAC

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