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# Delivering a world where

Every pregnancy is wanted



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Every childbirth is safe



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## **Foreword**

The United Nations and the Government of the Bolivarian Republic of Venezuela have signed a new Sustainable Development Cooperation Framework for 2023-2026, emphasizing their commitment to economic, social, and environmental development. In alignment with this framework, UNFPA has signed a new Country Program Document (CPD) for 2023-2026.

The program is implemented at both national and subnational levels, focusing on four interconnected priorities:

Quality of care and services.

Social and gender norms.

Population-related data and changes.

**Humanitarian action.** 

UNFPA's Strategic Plan (2022-2025) invites stakeholders worldwide to join the mission of achieving universal access to sexual and reproductive health and rights, and to accelerate progress in implementing the Programme of Action of the International Conference on Population and Development (ICPD). Our commitment to achieving three transformative results by 2030: ending unmet family planning needs, preventing maternal deaths, and eliminating gender-based violence and harmful practices, remains our priority.

Accelerators include gender approaches, leaving no one behind, strengthening partnerships, building resilience, and ensuring complementarity among development, humanitarian, and peacebuilding initiatives. In 2023, UNFPA marked 20 years of uninterrupted operations in Venezuela. Since 2018, we have worked to provide assistance to the most vulnerable through our Humanitarian Response Plan, thanks to the support of our donors. UNFPA's humanitarian assistance focuses on life-saving information and services to prevent and respond to gender-based violence and address sexual and reproductive health needs in prioritized states of Venezuela. Nearly 1,500,000 people have been assisted since 2019, with more than 370,000 people reached in 2023.

For 2023, the UNFPA team in Venezuela has outlined its intervention strategy to generate synergy between life-saving actions, development cooperation, capacity-building, and the promotion of peace structures to comprehensively address the needs, vulnerabilities, and risks faced by women, adolescents, and youth in the country.



# Understanding the context

In Venezuela, a combination of economic contraction, political polarization, chronic inflation, the post-pandemic impact of COVID-19, and localized violence has generated significant humanitarian needs. disproportionately affecting women and adolescent girls. These challenges are evident in the escalating gender-based violence and the difficulties in accessing quality maternal health services, which increase the risks of maternal mortality. Venezuela also has one of the highest rates of teenage pregnancy in Latin America and substantial unmet family planning needs. There is a critical shortage of contraceptives in public health centers, exacerbating levels of unintended pregnancy and the spread of sexually transmitted infections.

The crisis has severely disrupted healthcare services, particularly impacting peri-urban, rural, and indigenous communities, and has also led to an increase in different forms of gender-based violence, including intimate partner violence, along with a reduction in the availability of essential gender-based violence response services. Moreover, the limited availability of economic opportunities and services, combined with changes in family composition due to human mobility, have further heightened vulnerability and violence in the country.

In Venezuela, UNFPA has adapted its focus since 2018 to deliver timely and quality sexual and reproductive health services as well as gender-based violence response and support services, particularly in prioritized states: Amazonas, Apure, Bolívar, Delta Amacuro, Falcón, Miranda, Sucre y Zulia. These actions are informed by comprehensive data and analysis, such as the State of World Population report by UNFPA, and aim to address the multifaceted needs and vulnerabilities of women and young people.

Looking ahead, UNFPA is committed to fostering synergies between lifesaving interventions, capacity-building efforts, and peace promotion initiatives to comprehensively address the humanitarian crisis in Venezuela and support its most vulnerable populations.



1,500,000 people assisted since 2019



370,000 people reached in 2023.





# Sexual and Reproductive Health (SRH)

Supporting the National Public Health System to improve access to Sexual and Reproductive Health (SRH) services in 13 states: Aragua, Anzoátegui, Apure, Bolívar, Carabobo, Cojedes, Delta Amacuro, Guárico, Miranda, Sucre, Táchira, Zulia, and the Capital District. UNFPA focuses on quality assistance and life-saving services for women, pregnant women, postpartum women, and adolescents to prevent unintended pregnancies and maternal and neonatal morbidity and mortality as well as to address the consequences of sexual violence and the transmission of sexually transmitted infections (STIs).

## **Actions carried out:**

Improved access to contraceptive methods, family planning services, maternal care supplies, clinical management of rape, STI treatments.

Community awareness-raising, information, and sensitization activities on key SRH messages.

Refurbishment of infrastructure and spaces in health centers.

Strengthening of health personnel's capacities.

### Main achievements:

34,194



120,373



2,715



13,614



24

Women received contraceptive methods.

Individuals sensitized and informed about key messages and available SRH services.

Health personnel trained.

Rapid HIV and syphilis tests performed, of which 8,323 were performed on pregnant women.

Health centers supported for the clinical management of rape.



35,488



14,984



1,758



17,513

Births attended at health centers supported by UNFPA. Women attended prenatal care at health centers supported by UNFPA.

Health personnel trained on the clinical management of rape.

Adolescents boys and girls attended in differentiated adolescent care spaces.

## **Sexual and Reproductive Health Management** indicators

Women received contraceptive methods.



Amazonas	62
Anzoátegui	330
Bolívar	3,469
Carabobo	728
Cojedes	1,388
Delta Amacuro	60
Distrito Capital	4,747
Falcón	118
Mérida	1,060
Miranda	6,555
Monagas	2,310
Sucre	7,168
Táchira	2,903
Trujillo	386
Zulia	1,628
Total	34,127

#### Adolescents boys and girls attended in differentiated adolescent care spaces.\*



Anzoátegui	747
Apure	773
Bolívar	9,970
Miranda	2,526
Zulia	3,497
Total	17.513

Individuals sensitized and informed about key messages and available SRH services.



Anzoátegui	4,453
Bolívar	4,461
Distrito Capital	23,402
Miranda	41,980
Sucre	21,099
Táchira	10,917
Zulia	14,061
Total	120,373

#### Health personnel trained.



55
35
55
495
49
20
22
433
249
202
30
227
2,715

<sup>\*</sup> Result of the intersected work between sexual and reproductive health programs and comprehensive sexuality education.

#### **UNFPA IN VENEZUELA 2023**

#### Rapid HIV and syphilis tests performed.



Distrito Capital	2,567
Miranda	4,148
Sucre	3,661
Zulia	3,238
Total	13,614

# Women who attended prenatal care appointments supported by UNFPA.



Distrito Capital	5,701
Miranda	4,618
Táchira	911
Zulia	3,754
Total	14,984





Total	
Zulia	8,892
Táchira	2,156
Miranda	10,937
Distrito Capital	13,503

# Health personnel trained on the clinical management of rape



the clinical management of rape.	<b>M</b> N
Anzoátegui	124
Apure	30
Carabobo	154
Distrito Capital	373
Miranda	74
Sucre	63
Táchira	626
Zulia	314
Total	1,758



This work with communities has completely changed my life because when I'm walking, they say, 'Hey! let's talk, tell me about how to use contraceptives or look, is there already a place victims of sexual violence can go for help? I didn't know there were medications to prevent HIV transmission...' We already sense that people have affection for us, which allows us to sit down and talk to them... One already feels that people have that affection for us, and then we can sit down and talk to them. It's very nice when people say thank you, just for providing guidance.



I decided to use a contraceptive method because I still don't want to have babies, at the moment I live with my boyfriend, we are building a little house, so that after that we can have our family. I also want to learn to sew, take a sewing course, and I feel that if I get pregnant now I won't be able to do it, so I don't want to yet.

77



# Gender Based Violence (GBV)

UNFPA Venezuela provides multi-sectoral GBV response services and strengthens communities in seven states of the country to prevent and manage GBV: Apure, Bolívar, Capital District, Miranda, Sucre, Táchira y Zulia



A safe space is where we can share our joys and sorrows, to listen to each other, and to release those things that we have bottled up and leave us with a bad memory. Today I feel empowered to say it, I am capable of helping other women who were or are in the same situation as me, and telling them that there are organizations like yours that provide

#### **Actions carried out:**

Strengthened institutional capacity to ensure survivors' access to justice through training and awareness-raising.

Conducted training programs for community leaders on GBV prevention to facilitate case disclosure and safe referrals.

Communicated the importance of GBV prevention in communities and local media.

Capacity building for staff of social organizations that provide psychosocial support services, case management and legal counseling for survivors of GBV.

#### Main achievements:



4

Safe spaces established in communities for the implementation of empowerment programs for women and adolescents.



108

Adolescents and women participated in empowerment activities in Safe Spaces.



6

Organizations, supported by UNFPA, provided multisectoral response services to gender-based violence in 7 states: Apure, Bolívar, Capital District, Miranda, Táchira, Sucre, and Zulia.



50

26 psychologists, 14 case managers, and 10 lawyers, totaling 50 professionals, provided psychosocial support, case management, and legal guidance services, both in-person and remotely.



40,670

Women were sensitized and received printed edu-communication materials on gender-based violence prevention.



230

Personnel from social organizations strengthened their capacities to provide prevention and response services to gender-based violence.



903



645



13,443

People with disabilities participated in the activities.

Officials from public institutions and security forces reinforced their capacities to improve survivors' access to legal justice.

Men were sensitized and received printed edu-communication materials on gender-based violence prevention.

## Gender based violence Management indicators

Women were sensitized on gender-based violence prevention.



Apure	4,414
Bolívar	4,827
Distrito Capital	2,561
Miranda	15,405
Sucre	3,068
Táchira	5,092
Zulia	5,303
Total	40,670

Personnel from social organizations strengthened their capacities to provide prevention and response services to gender-based violence.



Apure	20
Bolívar	9
Distrito Capital	33
Miranda	154
Táchira	14
Total	230

## People with disabilities participated in the activities.



Apure	59
Bolívar	13
Distrito Capital	78
Miranda	274
Sucre	123
Táchira	138
Zulia	218
Total	903

Safe spaces established in communities for the development of empowerment programs for women and adolescents.



Distrito Capital	1
Miranda	1
Sucre	2
Total	Λ

Adolescents and women certified in empowerment activities in Safe Spaces established in communities.



Distrito Capital	30
Miranda	26
Sucre	52
Total	108

Men were sensitized on gender-based violence prevention.



Apure	2,018		
Bolívar	2,233		
Distrito Capital	539		
Miranda	3,929		
Sucre	1,327		
Táchira	1,640		
Zulia	1,757		
Total	13.443		

Officials from public institutions and security forces who strengthened their capacities to improve survivors' access to legal justice.



Apure	49
Bolívar	65
Distrito Capital	167
Miranda	131
Sucre	129
Táchira	44
Zulia	60
Total	645



# Comprehensive Sexuality Education (CSE)

UNFPA Venezuela provides technical assistance and coordinates actions with public institutions through the Ministries of Education, Health, Women, and Youth to support the formulation of public policies related to the prevention and reduction of early and teenage pregnancy, transmission of sexually transmitted infections (STIs) and HIV, as well as sexual and gender-based violence. Comprehensive Sexuality Education (CSE) projects are carried out in six states: Anzoátegui, Apure, Bolívar, the Capital District, Miranda and Zulia.

### Main achievements:



23,331

Girls, boys, and adolescents reached through Comprehensive Sexuality Education in schools.



3,934

Teachers trained in CSE.

### **Actions carried out:**

Design and development of content and training programs for CSE with a focus on rights and gender.

Training of teachers in CSE.

Training of healthcare personnel in differentiated adolescent care spaces.

Training of community leaders as community facilitators of CSE outside of school.

Technical assistance to strengthen the implementation of CSE policies in educational, health, and protection networks.

Training and empowerment of adolescents to prevent unintended pregnancies, GBV, STI's, and HIV.

Dissemination of messages and awareness-raising about CSE through media, social networks, and other communication strategies.



923



850





13,638

Adolescents trained to be CSE facilitators (peer promoters).

Schools reached with CSE.

Health personnel trained for differentiated adolescent care spaces.

Adolescents who accessed contraceptives in an informed manner.



31

Youth friendly spaces.



adolescents reached

Girls, boys, and

with CSE in

communities.



231

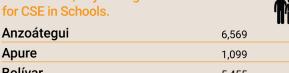


Community facilitators trained in CSE.

Established community networks for CSE.

## **Comprehensive Sexual Education Management indicators**

#### Adolescents, boys and girls reached for CSE in Schools.



**Bolívar** 5,455 **Distrito Capital** 87 Miranda 917 Zulia 9,166 **Otros** 38

**Total** 23,331

#### Teachers trained in CSE

reachers trained in OSL.	•
Anzoátegui	59 <b>II</b>
Apure	396
Bolívar	451
Distrito Capital	148
Miranda	789
Zulia	437
Otros	1,654
Total	3,934

#### Adolescents trained to be CSE facilitators (peer promoters).

N I	<b>'</b>
Apure	68
Bolívar	317
Miranda	356
Zulia	182
Total	923

Schools reached.	m m
Anzoátegui	52
Apure	121
Bolívar	232
Distrito Capital	3
Miranda	214
Zulia	197
Otros	31
Total	850



It's very important to be informed, otherwise that's when the consequences happen..... Like getting pregnant or getting a Sexually Transmitted Infection. It's important because we need to be prepared to do things right

## Differentiated consultations for adolescents supported by UNFPA.



Health personne	trained for
differentiated ad	olescent care spaces.



Anzoátegui	2
Apure	4
Bolívar	10
Distrito Capital	3
Miranda	6
Zulia	6
Total	31

Anzoátegui	14		
Apure	61		
Bolívar	235		
Miranda	156		
Zulia	132		
Otros	474		
Total	1,072		

## Girls, boys, and adolescents reached with CSE in communities.



	• •
Apure	834
Bolívar	2,548
Miranda	1,497
Zulia	3,042
Total	7,921

Community facilitators trained in CSE.		
Anzoátegui	11	
Apure	15	
Bolívar	71	
Distrito Capital	2	
Miranda	76	
Zulia	51	
Otros	5	
Total	231	



Established community networks for Comprehensive Sexuality Education.



The #HablemosClaro campaign against sexual abuse of girls, boys, and adolescents features Lela (@lelahiphop), a 13-year-old Venezuelan hip-hop artist who has dedicated her music to social causes such as the right to identity, the promotion of life projects, and the elevation of girls' voices in Latin America.

Comprehensive Sexuality Education.		
Anzoátegui	7	
Apure	6	
Bolívar	15	
Miranda	10	
Zulia	21	
Total	59	

## **CSE Communication**

#### 3

Seasons of the #HablemosClaro series for radio, television and social networks (10 one-minute micros).

#### 10



Educational podcasts for the prevention of Child Sexual Abuse.

### 45

Social media pieces on CSE-related commemorations.

#### 5

Recordings in 5 indigenous languages for production of the 4th season of #HablemosClaro for indigenous peoples (to be produced in 2024).

#### 2

Partnerships for UNFPA content broadcasting: Venevisión (National coverage channel) and the national cinema circuit CINEX.





# Population and development

The UNFPA's Population and Development agenda in Venezuela aims to strengthen cooperation for generating information, knowledge management, and evidence-based policymaking regarding population variables' influence on key issues such as climate change, aging, and human mobility.

Collaboration with the National Institute of Statistics focuses on updating sociodemographic data, while efforts are made to assess progress in implementing the Montevideo Consensus. Cooperation with the Ministry of Planning strengthens knowledge management in local planning with a sociodemographic focus.

In 2023, the Country Office reaffirmed its support and cooperation for the participation of institutions in international spaces, such as the Fifth Meeting of the Board of Directors of the CRPD, Montevideo Consensus anniversary and CEA-ECLAC, among others, where it supported the official delegation that represented the country.



Key partners for promoting the Population and Development agenda:

- Ministry of Popular Power for Planning.
- Venezuelan Institute of Applied Planning (FIVPA)-MPPP.
- Center for Scientific and Humanistic Development (CDCH)-Central University of Venezuela.
- Statistics National Institute (INE).



105 officials from Venezuelan Institute of Planning, Ministry of Planning and FIVPA, the INE and the Sectorial VicePresidency of Planning training in applied planning.

242 officials strengthen their capacities in indicators and public policies, as well as in demographic and population analysis.



# Gender, Adolescence, and Youth

The Gender, Adolescence, and Youth Area of UNFPA focuses its development actions on strengthening national capacities to transform discriminatory social and gender norms in order to promote gender equality, empower adolescent girls and women, and eliminate gender-based violence (GBV). UNFPA works with governmental, social and community-based entities to strengthen capacities with a focus on inter-sectionality, diversity, human rights, and integration of the humanitarian- development-peace nexus approach.

In 2023, a capacity-building program was developed to improve access to justice for survivors of GBV:



UNFPA also worked in partnership with the Center for Women's Studies at the Central University of Venezuela, to conduct a professional development course on masculinities and gender equity, involving 43 organizations from 13 states of the country.



513 officials were trained in 7 states of the country.



Key partners for promoting Gender, Adolescence, and Youth agenda: Ombudsman's Office (Development of a diploma program on GBV and disability) and the National Council for Persons with Disabilities (CONAPDIS) for the transfer of technical tools on differentiated care for GBV in adolescents and women with disabilities in all 24 states of the country.



The main participating institutions included: complaint receiving bodies, the Public Prosecutor's Office, Supreme Court of Justice, Public Defender's Office, Corps of Criminal and Criminalistic Investigations, CICPC, National Service of Medicine and Forensic Science, SENAMECF, Municipal and Regional Women's Institutes, among others.



# The Gender-based Violence Area of Responsibility (GBV AoR)

UNFPA leads the humanitarian response to gender-based violence in Venezuela, coordinating the humanitarian response to gender-based violence with the participation of UN agencies, funds and programs, national and international NGOs, local organizations, including women's organizations, women-led organizations, LGBTIQ+ organizations, indigenous women's organizations and people with disabilities.

### Main Results of 2023:



Mapping of protection services with **554 GBV response services**.



Update and collective construction of **26 GBV service referral routes** in 15 states of the country.



Capacity strengthening on GBV issues reached a total of 1,490 individuals, including 1,180 women and 310 men.

#### **GBV Specialist Actors**

Training of GBV SMAPs: 101 women, 5 men: 106 individuals. Case management of GBV, conducting workshops focused on the LGBTI population: 369 women, 75 men: 444 individuals.



Webinars on specialized topics such as disability, staff well-being, Clinical Management of Sexual Violence, LGBTI Population Care, Human Trafficking, Children and Adolescents, were conducted with the support of colleagues from UNFPA, UNICEF, UNHCR, IOM, OCHA, and and GBV AoR partners.



Non-specialist actors from Water, Sanitation and Hygiene, Shelter, Energy and Goods, Health, Education, Food Security, and Nutrition clusters.

Training on safe GBV referrals: 529 women, 189 men: 718 individuals.

Training on GBV risk mitigation: 181 women, 41 men: 222 individuals.



62 organizations implemented actions within the framework of multisectoral GBV prevention and response. Services were located in 24 states, 152 municipalities, and 385 parishes. This territorial coverage allowed for a response to 203,349 individuals. The GBV response is a lifeline, highlighting the importance of increased funding in GBV.





