

Bolivia

Consolidated Emergency Report 2016



Abel (age 9) in a community affected by severe flooding ©UNICEF/2016/Perez

Prepared by:
UNICEF Bolivia
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Table of Contents

Table of Contents.....	2
Abbreviations and Acronyms	3
Executive Summary	4
Humanitarian Context.....	6
Humanitarian Results.....	7
Monitoring and Evaluation	17
Financial Analysis	17
Future Work Plan.....	19
Expression of Thanks.....	19
Annex 1: Donor Feedback Form.....	20

Abbreviations and Acronyms

BCO	Bolivia Country Office
CCC	Core Commitments for Children in Humanitarian Action
COOPI	Cooperazione Internazionale
CP	Country Programme
CPAP	Country Programme Action Plan
DIPECHO	Department's Disaster Preparedness Programme
DNA	Ombudsman Office
FAO	UN Food and Agriculture Organisation
GAD	Autonomous Departmental Government
GAM	Autonomous Municipal Government
GoB	Government of Bolivia
MMAYaA	Ministry of Environment and Water
MoH	Ministry of Health
ODF	Open Defecation Free
SANTOLIC	Total Community-Led Sanitation
SEDEGES	Departmental Services for Social Management
SIAB	Water and Sanitation Information System
VIDECI	Vice-Ministry of Civil Defence
WASH	Water, Sanitation, and Hygiene

Executive Summary

In 2016, the first case of Zika was reported in Bolivia and the country continued to experience natural disasters due to consequences of climate change. After decades of worsening drought and following a strong 2014-2016 El Nino, this culminated to the declaration of a state of national emergency by the President in the end of November 2016. Approximately 125,000 families were under severe water rationing. The city of La Paz, which is the seat of Bolivia's government and home to about 800,000 people has seen its three reservoirs almost completely dry up. The situation has been exacerbated by a lack of preparation and limited management capacity, provoking risk of civil unrest.

UNICEF Bolivia plays an important role in ensuring the coordination of the humanitarian response, particularly the drought and Zika emergency, as leader of the Water, Sanitation and Hygiene (WASH) Humanitarian Thematic Group and co-lead in the thematic groups of nutrition, WASH and education under the leaderships of the sectoral Ministries.

In terms of the **Zika emergency response**, the first case of Zika in the country was confirmed on 16 January 2016, and by November this number had increased to 127, with 9 cases of microcephaly reported. Under the leadership of the Ministry of Health (MoH), UNICEF supported the implementation of a National Integrated Management Strategy for the Prevention and Control of Dengue, Chikungunya and Zika in the department of Beni. As a result of the interventions, 1,055 health professionals improved their capacities to perform differential diagnosis and epidemiological surveillance with an emphasis on microcephaly attributable to Zika. Targets for communication activities on information and prevention were exceeded, for example more than 27,000 students and 900 teachers were reached, with the targets being 20,000 and 100 respectively.

In 2016 UNICEF Bolivia supported the following initiatives to improve **nutrition** in emergencies: i) strengthening of technical capacities of nutrition staff in the Zika emergency response; ii) accompaniment of a multisectorial evaluation in response to the drought to identify rises in acute malnutrition; iii) technical and logistical assistance to prepare a reduction plan for severe acute malnutrition in the Bolivian Amazon; and iv) implementation of a joint resilience program to support communities severely affected by flooding in the departments of Beni and La Paz (northern region).

The **WASH** interventions implemented by UNICEF Bolivia in 2016 included: i) supporting the upgrading of the National Emergency Plan; ii) providing technical support for the formulation of technologies for WASH in emergencies guide and the WASH supply providers catalogue; iii) enhancing emergency coordination and response within the WASH sector; and iv) reducing vulnerability and improving resilience in water and sanitation in communities affected by recurring flooding.

Additionally, **education** activities supported by UNICEF Bolivia in 2016 included: i) the establishment of six Departmental Working Groups on Risk Management for the Education Sector; ii) strengthening capacities of 1331 teachers responsible for risk management and disaster prevention in schools; iii) information and prevention campaigns on Zika, Dengue and Chikungunya in 361 schools and also for use in training of educational directors; and iv) installing water tanks and providing water through trucks to schools in response to the drought emergency.

In terms of **child Protection**, UNICEF Bolivia supported the following initiatives: i) training in the promotion of care, security and protection of children and adolescents and promotion of violence, abuse,

exploitation and negligence for responses to the recurring flooding; ii) continuing psychosocial support in schools as part of the 'A New Sun for Community Wellbeing' initiative; iii) providing support at the departmental level to develop contingency plans for the protection of children and adolescents; and iv) developing material for the care and attention of children, adolescents and pregnant women affected by Zika and for the prevention of negligence and abandonment in the case of those recently born with microcephaly.

This year, UNICEF Bolivia also continued its engagement in a joint initiative with European Commission Humanitarian Aid Department's Disaster Preparedness Programme (DIPECHO), under the leadership of the UN Food and Agriculture Organisation (FAO), focusing on strengthening the resilience at community and service levels in the areas of WASH and nutrition. The programme targeted 12 municipalities in the departments of La Paz and Beni, and benefitted 200 families.

An evaluation of the Preparedness and Response Action Plan to El Niño 2015- 2016 was also carried out jointly with the Vice Ministry of Civil Defense (VIDECI) with the objective of assessing the Government's capacities in emergency preparedness and response in relation to Law 602 on disaster risk management and the national drought response plan. The results will allow the Government to better incorporate and comply with children's rights in future emergency preparedness and response plans at national and subnational levels.

Partners in the area of humanitarian assistance included: VIDEI and line Ministries, subnational governments and services; and NGOs, such as Sumaj Huasi and Aldeas Infantiles SOS. Funding was provided by the UK and Swedish National Committees, as well as by the UN emergency cash grant-funding mechanism.

Humanitarian Context

Since the late 1980's Bolivia has been highly vulnerable to natural disasters such as drought and flooding and climate change is likely to increase the frequency and severity of these extreme weather events. These periods have inflicted increasing stress on natural resources and livelihoods; between 2002 and 2012, 84 per cent of the municipalities of Bolivia were affected by flooding and 67 per cent by drought. In addition, decades of worsening drought and a strong 2014-2016 El Niño, culminated in the declaration of a state of national emergency by



the President at the end of November 2016; the city of La Paz, with a population of about 800,000 people, suffered from severe water rationing and almost dried out water reserves. It is likely that impacts of droughts will continue to worsen as the effects of global warming impact the living conditions and opportunities of children and communities, especially the poorest and most vulnerable.

Frequently, disasters, conflicts and other crises reverse progress made by communities, governments and development partners. Meanwhile, climate change and environmental degradation exacerbate these risks. In an age of rapid urbanization (due to migration of mainly indigenous communities) which results in unplanned settlements, land degradation and pollution, as well as increased pressure on fresh water supplies, and poor infrastructures, children and women and continually exposed to more risks.

In terms of the Zika virus, the first case of locally-acquired virus infection in the country was confirmed on 16 January 2016. By the end of 2016 there were 127 reported cases of the virus and 9 cases of microcephaly, as the 'El Niño' weather phenomenon and its impact on the environment and sanitation aggravated the situation. Between 2015 and 2016 cases of Dengue, Chikungunya and Zika were recorded in 55 Bolivian municipalities. The population of women of reproductive age at risk of contracting the ZikV in these municipalities is about 1.6 million and 71 other municipalities can be described as medium risk; they are located in the Amazon or Chaco region areas (206,000 women between 15-49).

The Government of the Plurinational State of Bolivia has published a "Decreto Supremo N° 2670" [Supreme Decree] supporting the implementation of a National integrated management strategy for prevention and control of dengue, chikungunya and Zika. The strategy is being implemented nationwide, and in the affected areas.

Humanitarian Results

WASH

Output 1.3.4: National capacity is strengthened to provide water, sanitation and hygiene services to girls, boys, women and families in humanitarian situations.

In 2016, drought affected the departments of Beni, Chuquisaca, Cochabamba, La Paz, Oruro, Potosi, Santa Cruz and Tarija, affecting 172,180 families. The Bolivia Country Office (BCO) and the Child Development and Survival sector provided support in the emergency situations by implementing joint actions within their WASH and nutrition programs. The institutions provided technical assistance to the Technical Roundtable of the Water, Sanitation and Hygiene in Emergency Situations (for which UNICEF Bolivia co-leads), under the National Coordination Platform.

Additionally, as the active leader of the Humanitarian Thematic Group on Water, Sanitation and Hygiene in Emergencies, UNICEF coordinated work on national themes and headed up the preparation of the first draft of the Group's TDRs.

Through prioritizing the provision of technical assistance at the national and subnational levels, in 2016 UNICEF achieved the following outcomes:

- Activation of the Technical Roundtable for Water, Sanitation and Hygiene in Emergencies, with bi-monthly meetings being held and the updating of the following instruments of the Roundtable:
 - National Sector Emergency Plan, prepared with technical and financial assistance from UNICEF.
 - Catalogue of Alternative Technologies for use in Emergencies, prepared with technical and financial assistance from UNICEF.
 - Updating of the EDAN, W3, list of contacts and work plan of the Technical Roundtable for the period 2016 – 2018.
 - Two special meetings were held and one is planned for the 7th and 8th of December. The meetings that were held were the following: i) Methods and Experiences in Risk Management, Climate Change Adaptation and Resilience in the Water, Sanitation and Hygiene Sector, ii) Special Meeting to Complete the WASH Sector Emergency Plan, Catalogue of Alternative Technologies for use in Emergencies and Work Plan for the period 2016-2018.
- Activation of the Humanitarian Thematic Group for Basic Water, Sanitation and Hygiene in Bolivia, headed up by UNICEF and co-lead with COOPI. Two meetings were held and consultation is in process to approve the TORs that were proposed.
- 2,017 families (a total of 10,085 people) from 60 communities in 12 municipalities in the departments of La Paz and Beni are less vulnerable to emergencies as a result of improving their water and sanitation services and nutritional practices and hygiene. This, in turn, ensures the capacity of the municipalities and departments to respond to emergencies. These actions were carried out through the Inter-agency Resilience Project. The municipalities involved were: San Buenaventura, Guanay, Palos Blancos, Ixiamas, Rurrenabaque, Reyes, San Borja, San Ignacio de Moxos, San Ramón, San Joaquín, Santa Ana del Yacuma and Riberalta.
- 108 community promoters (including 54 WASH promoters and 54 nutrition and health promoters) were selected and trained in 54 communities.

- 12 GAMs (from the municipalities of Palos Blancos, Guanay, Ixiamas, San Buenaventura, Rurrenabaque, Reyes, San Borja, San Ignacio de Moxos, San Ramón, San Joaquín, Santa Ana del Yacuma and Riberalta) have been trained in nutrition, water, sanitation and hygiene.



Improved sanitation practices in communities vulnerable to flooding
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Additionally, UNICEF has continued joint implementation of an interagency project “Increasing the preparation and resilience of prioritized, vulnerable, indigenous communities and organizations, using a multisector approach, at the local, national and subnational levels along the basins of the Beni and Mamore rivers”, which concluded at the end of 2016. The objective of the project is to reduce the vulnerability to emergencies by improving water and sanitation services and nutritional and hygiene practices, thus ensuring the strength of the municipal and departmental capacity in emergencies. The project was implemented UNICEF’s partner, the Sumaj

Huasi Foundation.

The interagency project includes both WASH and nutrition components. Key results included:

- Training of 60 communities (1580 families) so that they now have improved, sustainable and equitable access to basic services especially in emergency situations.
- Training of all health personnel in the target municipalities in nutrition, hygiene and nutritional assistance in emergency situations.
- Improved capacities of all 60 communities and their respective water committees in their abilities to manage water in times of crisis.

Finally, the following supplies were delivered in the Departments of Pando and Beni in partnership with the Sumaj Huasi Foundation:

- Pando: 3 portable sanitary kits for emergencies, 166 hygiene kits for schools and 430 ceramic water filters.
- Beni: 2 portable sanitary kits for emergencies, 1,252 hygiene kits, and 315 ceramic water filters.

Results Table

No	Context-Specific Indicators	Baseline		Target		As of Date	Status	Primary Source
		Year	Value	Year	Value			
1	Number of people in humanitarian situations accessing sufficient quantity of water of appropriate quality for drinking,	2015	N/A	2016	N/A	21.11.2016	None. No emergency response in 2016.	

	cooking and personal hygiene							
2	Number of people in humanitarian situations accessing appropriate sanitation facilities	2015	N/A	2016	N/A	21.11.2016	None. No emergency response in 2016	
3	Number of people in humanitarian situations able to practice appropriate hygiene: hand-washing and menstrual hygiene management	2015	N/A	2016	N/A	21.11.2016	None. No emergency response in 2016	
4	Number of people in humanitarian situations accessing appropriate WASH facilities and hygiene education in schools, temporary learning spaces and other child-friendly spaces	2015	N/A	2016	N/A	21.11.2016	None. No emergency response in 2016	

Nutrition

Output 1.4.4: Increased national capacity to ensure protection of the nutritional status of girls, boys and women in humanitarian situations.

In 2016 there were no specific interventions concerning nutrition emergency response. However, the health and WASH areas contributed jointly to strengthening the technical capacities of the nutrition personnel in the Department of Beni in response to the Zika emergency by, particularly in correctly measuring head circumference. The two areas also worked together to promote the continuation of breastfeeding.

The western region of the country was affected by drought, particularly the Department of Oruro. UNICEF provided accompaniment for a rapid multisectoral evaluation, headed up by the World Food Program, in which primary information was collected through interviews and secondary information was collected on nutritional status. As a result of the evaluation, it was decided that inputs would be provided to five municipalities that had shown an increase in acute malnutrition. Additionally, technical support was provided to SEDES during technical meetings held between the



Bio diversity to strengthen national resilience.

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Departmental Nutrition in Emergencies Committee and the municipal governments, which led to the development of an action plan.

Emergency preparedness was also strengthened in 2016, particularly through the aforementioned resilience program (also part of the WASH component). The program implemented community-level action and organizational strengthening, using an intersectoral approach in which WASH and nutrition actions were linked. These activities were implemented in 60 communities in 12 municipalities along the basins of the Beni and Mamore rivers.

Key outputs in 2016 included:

- Technical support to the Oruro Nutrition in Emergencies Committee in conducting a situational assessment and planning the response to drought.
- Provision of nutritional supplements for the emergency situation resulting from drought in Oruro, for five severely affected municipalities.
- Pre-positioning of nutritional supplies for emergency situations in vulnerable municipalities in the departments of Beni and northern Paz.
- Creation of community promoter networks for health and nutrition in 12 municipalities in the river basins of the Beni and Mamore rivers to work on resilience.
- 60 health and nutrition promoters (32 women and 28 men), from 54 communities in 12 municipalities, were trained in promoting key community resilience and nutritional control practices.
- 80 municipal technicians (42 women and 38 men) trained in nutrition management in emergency situations.
- 12 municipalities strengthened with regard to implementing nutrition situation rooms as part of risk management and the SAFCI policy.
- 12 municipal governments have WASH and nutrition tools for working on resilience.

Results Table

	Context-Specific Indicators	Baseline		Target		As of Date	Status	Primary Source
		Year	Value	Year	Value			
1	Children aged 6-59 months with SAM targeted by UNICEF-support (financial or supplies) in humanitarian situations	2015	N/A	2016 2017	N/A N/A	N/A in 2016	In 2016, no humanitarian assistance was provided in nutrition	MoH
2	Percentage of children between the ages of 6 to 59 months with acute severe malnutrition receiving treatment and care during a humanitarian situation.	2015	N/A	2016 2017	N/A N/A	N/A in 2016	In 2016, no humanitarian assistance was provided in nutrition	MoH

3	Percentage of children between the ages of 0 to 23 months that have access to counselling services on infant and child nutrition.	2015	N/A	2016 2017	N/A N/A	N/A in 2016	In 2016, no humanitarian assistance was provided in nutrition	MoH
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Education

Output 1.5.4: Capacity of public institutions to ensure children and adolescent access to educational services in emergency situations is strengthened.

With UNICEF support, by the end of 2016 six of the nine Departmental Working Groups on Risk Management for the Education Sector had been set up (with ToRs and founding charters), in the departments of Potosí, Santa Cruz, Pando, Beni, Chuquisaca and Tarija. These working groups are in the process of being set up in the three remaining departments: Oruro, Cochabamba and La Paz.

- Most of the working groups are led by the Departmental Education Directorate, and their members include representatives from the Specialized Units for Ongoing Teacher Training (UNEFCO), Departmental Civil Defence and departmental government offices such as the Human Development Secretariat, the Risk Management Unit and the Hydrometeorology and Hydrology Service. In some cases, they also include representatives of the municipal government in the departmental capital.
- With technical assistance from UNICEF, technical meetings were held with Departmental Education Directors to explain the structure, organization and characteristics of the National Education Sector Working Group on Risk Management. These working groups enable knowledge, experience, human resources, funds, demands and proposals to be pooled and harmonized, in order to guarantee the right to quality education in emergency situations, taking into account both teaching processes and school management and administration.

Furthermore, to strengthen the capacities of the institutions responsible for risk management in schools, UNICEF worked in partnership with UNEFCO to take forward ongoing training for teachers in the Plurinational Education System (SEP) on risk management and climate change. This training was carried out using the training booklets produced by the Ministry of Education together with the members of the Education Sector Working Group on Risk Management. The number of teachers trained to date is shown in the following table:

DEPARTMENT	MUNICIPALITY	CYCLES	PARTICIPANTS PER CYCLE	TOTAL
COCHABAMBA	Cochabamba	8	35	280
	Omereque	1	35	35
	Pasorapa	1	35	35
CHUQUISACA	Poroma	1	40	40
	Yamparaez	1	35	35

POTOSI	Potosí	8	35	280
ORURO	Oruro	2	48	96
SANTA CRUZ	Santa Cruz	1	35	35
BENI	Beni	2	23	46
	San Ignacio de Moxos	1	20	20
	Rurrenabaque	1	25	25
PANDO	Cobija	7	35	245
LA PAZ	El Alto	1	48	48
	La Paz	1	46	46
	San Buena Aventura	1	25	25
	Caranavi	1	40	40
SUM TOTAL				1,331

In this same area of work to strengthen the capacities of schools and teachers, four “*Practical Guides for disaster prevention and response in schools*” were produced, one for each type of disaster event. These are being used by teachers and education cluster directors in activities to prepare schools for possible emergency events. The four guides are:

- White guide: Frost and snow
- Blue guide: Flooding, overflows and flash floods
- Red guide: Drought and fires
- Brown guide: Earthquakes and landslides



Finally, in the area of emergency response, fortunately no emergency events occurred in 2016. Nevertheless, UNICEF worked intensively on the information and prevention campaigns on Zika, Dengue and Chikungunya, with information leaflets and posters being produced and distributed to 361 schools. These materials were used to train district education directors in the departments prioritized according to their risk of exposure to these threats: Santa Cruz, Beni, Pando, northern La Paz, Tarija and Chuquisaca. The information is summarized in the table below:

DEPARTMENT	MUNICIPALITY	PARTICIPANTS		TOTAL
SANTA CRUZ	Santa Cruz	24	District Directors	70
		26	School Directors	
		5	DDE staff	
		10	District staff	
		5	Institutions in Santa Cruz	

PANDO	Cobija	24 District Directors 26 School Directors 5 DDE staff 10 Teachers 4 Institutions in Pando	69
LA PAZ	Caranavi	2 District Directors 50 School Directors 8 Teachers	60
	San Buenaventura	2 District Directors 50 School Directors 8 Teachers	60
BENI	Trinidad	25 School Directors 4 Teachers 3 UNEFCO members	32
	Rurrenabaque	25 School Directors 10 Teachers	35
	San Ignacio de Moxos	20 School Directors 10 Teachers 5 GAM Representatives	35
TARIJA	Tarija	110 School Directors	110
CHUQUISACA	Sucre	20 District Directors 26 School Directors 5 DDE staff 10 Teachers	61
	Mojocoya	27 Teachers 3 Directors 10 parents	40
TOTAL			572

At the same time, technical assistance was provided to train staff to implement the “*Nuevo Sol* Community Wellbeing” Programme for children aged 3-6 and schoolchildren during emergencies. They were also shown how to analyse indicators related to early childhood, education and child protection. So far, at least 120 people have been trained as volunteers ready to go into action when needed in the departments of Beni, Pando and Santa Cruz.

In response to the drought in November 2016 in La Paz, with UNICEF support, the Ministry of Education installed water tanks as well as using tanker trucks to supply water to schools. Another measure adopted by the Ministry of Education was to bring the end of the school year forward by a week: term ended on 30 November in primary schools and on 2 December in secondary schools.

Results Table

Context-Specific indicators	Baseline	Target 2017	Update 2016	Primary source
UNICEF-targeted children in humanitarian situations accessing formal or non-formal basic education (including pre-primary schools/early childhood learning spaces) - number & percent, see guidance	2012 0	60%	50%	Education table data
	2012	800	No data	

School aged children targeted by UNICEF that have access to psychosocial support in their schools/learning spaces during and after the humanitarian situation - number & percent	0			
Number of subnational working groups on education in emergencies functioning	0	4	6	Education table data

Protection

Output 2.6.4: Children and adolescents in emergency situations that have access to services protecting them from violence and providing psycho-affective recovery therapy.

In 2016, UNICEF has concentrated its efforts on ensuring that child protection services are ready to respond to an emergency swiftly and effectively, establishing partnerships with the Departmental Governments of Pando, Beni and Santa Cruz.

Due to the recurrence of natural disasters involving flooding in the eastern region of the country, three training workshops were organized for 53 staff from the Risk Management Units, SEDEGES and DNA on the Minimum Standards for Child Protection in Humanitarian Action, prepared by the Child Protection in Emergencies (CPiE) Cluster. These focus the work of the child protection services on care, security and protection for children and adolescents and the prevention of violence, abuse, exploitation and neglect.

UNICEF has also trained 72 staff from the child protection services, education services and schools, early childhood development centres, universities and civil society organizations on the psycho-emotional and social recovery methodology called “*Nuevo Sol* Community Wellbeing”. They were given a toolkit of play-based materials designed to be used with groups of children aged 3-5. Similarly, 62 staff were given training to use this methodology with groups of children aged 6-12 and were provided with the backpack of therapeutic materials.

In keeping with a recent national law, each sector is allowed to prepare a contingency plan. UNICEF is supporting SEDEGES in Beni, the Human and Social Development Secretariat in Pando and the Public Safety Secretariat in Santa Cruz to draw up contingency plans for child protection. As well as setting out the immediate actions to be taken, these plans also include the possibility of allocating a budget when an emergency is declared, thus ensuring care and security for children and adolescents.

The presence of the Zika virus in Bolivia brought with it the threat that 10% of pregnant women could give birth to babies with microcephaly, who would be unable to walk and talk and have difficulties with their psychomotor development, which could even result in the risk of newborn babies being abandoned. In response, UNICEF formed a partnership with the organization Samaritan’s Purse to prepare information and guidance materials on care and support for children, adolescents and pregnant women affected by the Zika virus, with the aim of preventing neglect and abandonment of newborn babies with microcephaly.

Results Table

Context-Specific Indicators	Baseline		Target		As of Date	Status
	Year	Value	Year	Value		
Number of municipalities at-risk of disasters that have programs in place to prevent sexual violence, protect children and adolescents, monitor violence, and provide psycho-affective and social recovery therapy in Beni, Santa Cruz and Chuquisaca.	2013	5	2017	15	28.11.16	7 municipalities with greater capacities to protect children and adolescents in emergencies (Rurrenabaque, San Ignacio, Trinidad, Riberalta, Guayaramerín, Cobija and Porvenir) and managed to attend with psycho-affective recovery actions to 5,582 children and adolescents.

ZIKV Emergency Response

In 2016, Zika prevention actions in Bolivia were developed by UNICEF, and led by the Ministry of Health (MoH) and the Departmental Direction of Health in Beni (SEDES), Ministry of Education, Departmental Directorates of Education, in alliance with Save the Children, Sumaj Huasi and other departmental organizations. Direct interventions were carried out in seven municipalities in Beni department, selected through agreement with the MoH. Additionally, wider technical assistance was provided at the central/national level to the MoH, which meant that interventions were both at the national level and indirect, and at the local level ensuring direct impact. The results surpassed the targets, due to the effectiveness of the broad and coordinated interventions with the governments (local and central levels), as well as strategic alliances and the inclusion of local leaders and organizations.

At the departmental level a total of 248,859 people were reached (29,060 directly and 219,799 indirectly) through the implementation of a Zika preventive Communication for Development, consisting of: a) inter-institutional coordination; b) key actors mapping; c) training sessions targeting community organizations/leaders; health, education and WASH technicians/staff; school communities (teachers, students and parents associations) and health sentry soldiers to ensure replication of key messages (individual Zika prevention measures and joint actions for the elimination of mosquito breeding sites); d) social mobilization actions to execute the community based elimination of mosquito breeding sites; and e) to complement these actions technical assistance and in some cases financial assistance was provided to the design, production and dissemination of communication materials. Thanks to the collaboration and the continuous interest of the different institutions, we were able to expand our coverage, generating a greater impact in the area of action of the project.

This strategy was particularly effective with children and adolescents; 27,667 benefited directly from interventions carried out with authorities, education and health personnel. Not only were the children

trained in Zika prevention, they also took the lead in transferring messages to their peers and the community through mass-participatory activities such as educational games; theatrical performances; cleaning campaigns, and school fairs, oriented towards the whole municipality, beyond their school community.

Additionally, the training of 438 government officials from Departmental Health Service (SEDES); municipal government; Education District Directorate (DDE); Social Services (SEDEGES and DNA); Civic Committees and other institutions contributed to ensuring the sustainability for future actions. Five out of seven municipalities (Guayaramerin, Riberalta, Rurrenabaque, San Borja and San Andrés) decided to develop a *Zika/Dengue/Chikungunya Response Plan*, allowing for the allocation of financial and technical resources to prevent and respond in a possible emergency.

In addition to training, interpersonal and group communication, printed, audio and audio-visual material developed by the MoH was disseminated in various media outlets in every municipality, amplifying knowledge and interest of thousands of people.

UNICEF Bolivia also developed actions to improve the technical competence of 1,055 (73%) health professionals working in seven municipalities (Riberalta, Trinidad, Rurrenabaque, Guyaramerin, San Andres, and San Borjas) to make differential diagnoses between Dengue, Chikungunya and Zika. Additionally, epidemiological surveillance actions were implemented with emphasis on microcephaly attributable to Zika.



Educational Fair: "Fe y Alegría" school, Municipality of San Borja

Information bulletins and posters were prepared and distributed in 361 Educational Units. District education directors, technicians and teachers from the prioritized departments and districts of Santa Cruz, Beni, Pando, northern La Paz, Tarija and Chuquisaca were trained. 572 District directors, school principals and teachers were reached. Municipal technicians were trained in Risk Management and proper use of water storage containers for the elimination of vector breeding sites. Community Water Committees (CAPyS) were trained in the management and storage of safe water. Finally, 350 water purifying filters were also delivered to 350 families.

Results Table

Indicators	UNICEF 2016 Target	UNICEF Total results
Public Outreach: # of people reached with preventive Zika virus messages through mass, social and digital media communication campaigns.	350,000 people	At the national level, the Ministry of Health's mass communication strategy, technically assisted by UNICEF, reached over 3 million). (It reached 5 departments – only 1 was planned).
Community Engagement: # of departments/municipalities in the region reporting the implementation of communication strategies for individual and community empowerment for control and prevention of Zika virus.	1 department (Beni) and 7 municipalities.	The department of Beni and its 17 municipalities.

# of families reached with social mobilization and interpersonal communication Zika virus prevention sessions.	We measured students, teachers and community leaders, not families	248,859 people (29,060 directly and 219,799 indirectly)
Child and Adolescent engagement: # of children and adolescents participating as agents of social mobilization at community level.	20,000	27,000
# of pregnant women benefited with UNICEF-supported interventions to prevent Zika virus infection.	4,500	5,200
# of students enrolled in schools where Zika UNICEF- supported interventions activities are implemented.	20,000 in 130 school communities	27,000 in over 180 school communities in Beni. Additionally 200 schools in other departments received materials financially and technically assisted by UNICEF
# of people benefited by UNICEF-supported environmental management interventions.	100,000	248,859 people (29,060 directly and 219,799 indirectly)
# of people whose districts implement active vector control programs supported by UNICEF.	100,000 in 7 municipalities	248,859 people in 7 municipalities

Monitoring and Evaluation

Monitoring and evaluation of the situation of children and women in Bolivia in emergencies is a central aspect of UNICEF Bolivia's programme implementation. Baselines and targets are systematically established together with implementing partners. Monitoring of results covers national and subnational levels through regular field and monitoring visits and mid- and end of year meetings, to review progress towards targets. This monitoring process ensures that advances can be systematically reported by counterparts, and allows problems to be avoided and adjustments to be made as necessary. UNICEF Bolivia updates partners on progress through annual reports.

Financial Analysis

This section contains the details related to the financial implementation of grant SM149910 allocated to Bolivia Country Office as part of the Global Thematic Humanitarian Response.

Table 1: Funding status against the appeal by sector (USD)

Sector	Requirements (USD)	Funds available against appeal as of 31 December 2016 (USD)	Funding GAP	
			USD	%
WASH and Sanitation	12,501	12,501	0	100%

Funds available include funds received against current appeal and carry forward from previous year

Table 2: Funding received and available (by 31 December 2016) by donor and funding type

Donor name/Type of funding	Programme budget Allotment reference	Overall Amount
I. Humanitarian funds received in 2016		
a) Thematic humanitarian funds		
See details in table 3	SM/14/9910	12,501
b) Non thematic funds		
None		0
Total non-thematic humanitarian funds		
c) Pooled funding		
CERF		0
Humanitarian response fund		0
d) Other types of humanitarian funds		
None		0
Total humanitarian funds received in 2016 (a+b+c+d)		12,501
II Carry over of humanitarian funds available in 2016		
e) Carry over thematic humanitarian funds		
Thematic humanitarian funds		0
f) Carry over of non-thematic humanitarian funds		
None		0
Total carry over non thematic humanitarian funds		0
Total carry over humanitarian funds (e+f)		0
III. Other sources		
Regular resources diverted to emergency (ZIKA)	Non GRANT (GC)	150,000
Regular resources set aside or RR or unfunded OR used for emergency	NONE	0
EPF if not reimbursed by 31 Dec 2016 (ZIKA)	GE/16/0011	100,000
Total other resources		250,000

Table 3: Thematic humanitarian contributions received in 2016

Thematic humanitarian contributions received in 2016 (in USD)/Donor	Grant Number	Programmable Amount (In USD)	Total contribution amount (In USD)
Global Thematic Humanitarian Response- Thematic FUND	SM/14/9910	12,501	12,501
Total		12,501	12,501

Future Work Plan

The priorities for action in 2017 will continue along the lines of the work carried out during 2016, steering UNICEF's action and the action of its counterparts towards improving resilience in the face of climate-change related impacts, nutrition practices at the community level, strengthening health services and emergency preparedness, and generating evidence. UNICEF will continue to employ advocacy and technical assistance as priority strategies to achieve its objectives.

In terms of the Zika emergency response, actions for 2017 will focus on 1) the prevention of the virus amongst women and girls of a fertile age and pregnant women and teenagers; and 2) integrated and multi-disciplinary care and attention for children born with microcephaly and other deformities attributable to the Zika virus and their families.

Expression of Thanks

The support from UNICEF National Committees, the Government of Sweden, the European Union, and, above all, the Government of the Plurinational State of Bolivia, has underpinned the successful implementation of our strategies for emergency preparedness and response, and without it we would not have been able to achieve our goals.

On behalf of Bolivian children, UNICEF Bolivia gratefully acknowledges this important contribution to Bolivia's emergency response that has played a key role in impacting the well-being of Bolivian children in a positive way and improving their chances of survival and providing them with opportunities to thrive. UNICEF Bolivia looks forward to its continued partnership and championing of children's rights and well-being.

Annex 1: Donor Feedback Form

UNICEF is working to improve the quality of our reports and would highly appreciate your feedback. Kindly answer the questions below for the above-mentioned report and return to the UNICEF Bolivia Country Office. *Thank you!*

Please return the completed form back to UNICEF by email to:

Name: Katarina Johansson Mekoulou, Deputy Representative

Email: kjohansson@unicef.org

SCORING: '5' indicates "highest level of satisfaction," while
'0' indicates "complete dissatisfaction"

1. To what extent did the narrative content of the report conform to your reporting expectations? (For example, the overall analysis and identification of challenges and solutions)

5	4	3	2	1	0
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If you have not been fully satisfied, could you please tell us what did we miss or what could we do better next time?

2. To what extent did the fund utilization part of the report meet your reporting expectations?

5	4	3	2	1	0

If you have not been fully satisfied, could you please tell us what did we miss or what could we do better next time?

3. To what extent does the report meet your expectations in regard to the analysis provided, including identification of difficulties and shortcomings as well as remedies to these?

5	4	3	2	1	0

If you have not been fully satisfied, could you please tell us what could we do better next time?

4. To what extent does the report meet your expectations with regard to reporting on results?

5	4	3	2	1	0

If you have not been fully satisfied, could you please tell us what did we miss or what could we do better next time?

5. Please provide us with your suggestions on how this report could be improved to meet your expectations.

6. Are there any other comments that you would like to share with us?
