



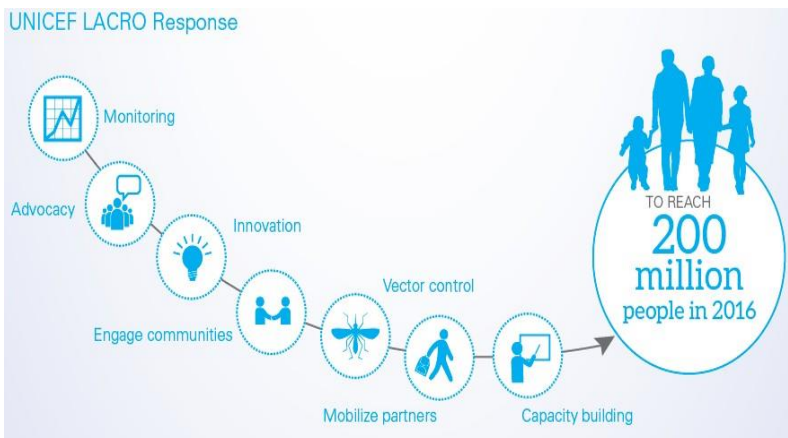
# LAC-RO Humanitarian Situation Report No.2

unicef 

## RESPONSE HIGHLIGHTS

- **BRAZIL:** UNICEF carried out 23 trainings on the new UNICEF Seal strategic action against the *Aedes aegypti* mosquito with the participation of 2,258 people (including 730 adolescents) from 681 municipalities in 9 states.
- **COLOMBIA:** UNICEF is coordinating mobilization actions reaching 354 schools and training 500 teachers on community engagement methods and solid waste management.
- **HONDURAS:** UNICEF is developing baseline knowledge, attitudes and practices in the prevention and control of vector-borne diseases.
- **MEXICO:** UNICEF is engaging with the government branch responsible for indigenous population policies to develop a targeted strategy to disseminate prevention messages to 6.6 million people in rural and indigenous communities.
- Since the last regional Situation Report, the overall number of Zika virus (ZIKV) cases has increased 32 per cent, from 145 thousand, reported 16 March to 192 thousand reported 24 March 2016. During the same time period, there has also been an increase in microcephaly and/or central nervous system (CNS) malformation from 5,909 to 6,776 cases.

### UNICEF LACRO Response



## SITUATION OVERVIEW

LAC countries reporting ZIKV local transmission with UNICEF presence: Bolivia, Brazil, Colombia, Costa Rica, Cuba, Dominican Republic, Ecuador, El Salvador, Guatemala, Guyana, Haiti, Honduras, Jamaica, Mexico, Nicaragua, Panama, Paraguay, Suriname and Venezuela.

Over 192,000 ZIKV cases either suspected or confirmed as of 24 March 2016.

6,671 suspected cases of microcephaly and/or CNS malformation from 22 October 2015 to 19 March 2016 in Brazil. Brazil, Colombia, El Salvador, Honduras, Suriname and Venezuela have reported an increase in cases of Guillain-Barré Syndrome (GBS).

16.1 million people reached through Risk Communication and Community Engagement.

*PHOTO: Left to right, UNICEF's Maria Estella Caparelli, Mario Mosquera and Rogelio de Oliveira engage with the mother of a child born with ZIKV-related microcephaly in Campina Grande, Brazil.*

## 1. EPI UPDATE

- Clusters of microcephaly and other neurological disorders reported in affected areas were declared a Public Health Emergency of International Concern by World Health Organisation (WHO) on 1 Feb. 2016.
- Zika virus has spread rapidly to at least 33 countries and territories in Latin America and the Caribbean since 2015. WHO has warned that the virus could infect as many as three to four million people within 12 months in the Americas.
- In addition to the increase in microcephaly and CNS malformation cases in Brazil, Colombia is investigating 32 reported cases of microcephaly, eight showing laboratory evidence of ZIKV virus infection. 50 cases of microcephaly have been reported in Colombia since 1 Jan. 2016 compared to the 30 cases that would be expected according to past trends.
- In addition, Panama and Martinique have each reported one case of microcephaly with positive test results for ZIKV virus.
- Based on observational, cohort and case-control studies, there is strong scientific consensus that ZIKV is a likely cause of GBS, microcephaly and other neurological disorders.

## 2. NATIONAL RESPONSES

- National response mechanisms and action plans have been activated throughout the region. Health ministries are leading the response and coordinating multi-sectorial efforts by using networks and resources previously allocated for dengue and chikungunya prevention.
- Although the intensity and pace of the outbreak in each country varies, the LAC response has been predominately cross-sectorial.
- Stakeholders from diverse public sectors, including emergency response, environment, water and sanitation and education are being called to play major roles in reaching out to communities and changing behaviours.
- Governments are focusing on mass communication, social mobilization and direct vector control with the support of the UN System, other international partners and civil society.
- As the number of GBS and other CNS malformation cases increase, health and social protection systems in affected countries will be challenged.
- Supporting and sustaining public action as well as addressing underlying structural drivers related to environmental conditions—such as sanitation and water and sewage management—are key challenges.

## 3. HUMANITARIAN LEADERSHIP AND COORDINATION

**DELIVERING AS ONE:** UNICEF LAC-RO works with UNDG-LAC and REDLAC interagency sector working groups along with sub-regional and inter-governmental organisations to contribute to a coordinated regional approach. The approach is built on communicating and meeting with regional sectorial groups (Health, WASH, Nutrition, Communication for Development (C4D), analyzing sectorial gaps, and developing key messages, regional strategies and strategic guidelines. UNICEF co-facilitates the regional communication and social engagement working group.

**WORKING WITH PARTNERS AND CIVIL SOCIETY:** At the global level, UNICEF contributed to the elaboration of the WHO-led global Strategic Response Framework, which highlights the UNICEF participatory role in existing inter-agency coordination mechanisms such as the Inter-Agency Standing Committee (IASC) and the Global Outbreak Alert and Response Network (GOARN). At the regional level, UNICEF is working closely with UN, NGO and Red Cross partners. Regular meetings with WHO in Geneva and the Pan American Health Organisation (PAHO) at regional and CO levels ensure close cooperation and alignment between UNICEF and WHO strategies.

#### 4. HUMANITARIAN STRATEGY

As we enter the 3rd month of the response, the regional strategy has proved a solid guide for UNICEF response. C4D and the use of a multi-sectorial approach to support families and communities to build the knowledge and capacity to self-protect remains the core focus. Country offices with the support of LACRO are the primary drivers of UNICEF response.

In collaboration with WHO, PAHO, International Federation of Red Cross and Red Crescent Societies (IFRC), and the Centers for Disease Control and Prevention (CDC), UNICEF continues to respond to the challenges of this epidemic. Building on its long-standing partnership with national and local authorities, civil society organisations and community networks, and using its network of 24 offices serving 36 countries and territories in Latin America and the Caribbean, UNICEF is working in support of national and local governments to control the spread of ZIKV and mitigate its impact on children and their families, particularly in the most disadvantaged communities.

#### 5. SUMMARY ANALYSIS OF PROGRAMME RESPONSE

As the outbreak situation develops in the region, UNICEF Country Offices (COs) are engaged in various response phases. Some, like Honduras, are led by the President of the Republic with the collaboration of Ministry of Health (MoH) and Education (MoE) and municipalities. In many cases, plans to prevent ZIKV are being linked to existing or improved plans to address dengue and chikungunya. In those countries where no cases have been reported, such as Belize, efforts have been concentrated on identifying high-risk municipalities and developing prevention campaigns through mass media.

Topical summary of the overall LACRO response:

**SUPPORT TO COUNTRY RESPONSES:** Support to counterparts in developing and reviewing national strategies continues to be a main focus of the regional response. Since our last report, capacity-building missions to Brazil, Colombia, Ecuador, Paraguay and Uruguay have taken place. Advice has been provided in the development of knowledge, perception and attitude (KAP) studies and/or focus groups to inform the C4D strategies implemented at municipal level.

**LESSONS LEARNT:** The education sector is being increasingly integrated into the response strategy, offering a window of opportunity and specific niche for UNICEF to work with the education sector and school age children. In Colombia, for example, in collaboration with the Ministry of Education (MoE) and the Terre des Hommes Foundation, 354 schools have been reached, providing training to over 500 teachers on community engagement methods and solid waste management.

**IDENTIFIED CHALLENGES:** Seasonality is a driving factor in the next months as several countries are exposed to either the end of the rainy season or the start of it. In Asuncion, Paraguay, recently visited by the ZIKV team, approximately 100.000 people are being impacted by floods in a dengue-affected zone, clearly putting vulnerable populations at a higher risk of ZIKV infection.

The country specific response activities summarized below indicate start-up and ongoing response activities in each country. Some of them, depending on the spread of the outbreak, are at the early stage of setting enabling conditions, agreements and networks to accomplish targets; others, such as Brazil and more recently Colombia, are further along and therefore reporting on accomplished tasks, follow up, and concrete response data.

#### 6. ZIKV CELL SUPPORT

LACRO is continuing to support country level responses and assist UNICEF COs in building consistent and relevant approaches and strategies in support of national responses.

**COORDINATION & PARTNERSHIPS:** The LACRO C4D team has been extensively engaged in co-leading the Regional Risk Communication and Community Engagement planning.

- At the regional level, UNICEF and IFRC have developed a concept note to guide UNICEF COs and Red Cross National societies in joining efforts in the response and collaborating in social science research on ZIKV, social mobilization, capacity building of local partners, and engagement of communities through U-Report.
- UNICEF and UNFPA are working together to create a regional alliance with Faith Based Organisations, leveraging existing agreements with Religions for Peace and the Latin-American Church Council.

**TECHNICAL SUPPORT:** UNICEF LACRO, in close collaboration with HQ, has put together three technical notes to support UNICEF COs in discussions with their counterparts and strategy implementation:

- Vector control
- Preventive strategies and messages in the education sector
- Non clinical care and support to families affected by ZIKV and disabilities

In all technical areas, UNICEF HQ and LACRO have held discussions with PAHO/WHO and other key partners such as CDC, MENTOR and Save the Children to assess the need and feasibility of joint guidance documents.

Furthermore, UNICEF HQ technical team and LACRO are producing a digest of ZIKV-related literature to aid technical and non-technical UNICEF colleagues in more effective programming and response in the field.

### SUPPORT MISSIONS

- **BRAZIL:** The ZIKV C4D team has supported the CO in assessing the current response and collecting evidence on gaps and strengths, particularly in the high priority Northeast region. The UNICEF C4D team supported and monitored the implementation of the qualitative data collection phase of research in Campina Grande, with focus groups consisting of local decision makers, frontline health workers, pregnant women, community leaders and adolescents to assess the level of perceived risk around ZIKV and associated complications, knowledge, attitudes, practices, influencers and barriers to Behaviour Change Communication (BCC).
- **COLOMBIA:** Two field C4D scoping visits supported the Ministry of Health (MoH), PAHO and other partners in further strengthening the national Risk Communication and Community Engagement plan. Participatory workshops at the department level have been scheduled to ensure that priority Risk Communication and Community based-vector control interventions are prioritized in the five-year territorial plans.
- **PARAGUAY:** The ZIKV C4D and WASH teams have supported the CO in a scoping mission to define the details of the ZIKV response plan, ensuring that the proposed activities are aligned with the national MoH Risk Communication and Community Engagement plan supported by PAHO and other partners. UNICEF is tailoring the ZIKV plan to ensure that highly vulnerable populations in areas affected by recent floods are prioritized and reached with comprehensive C4D, WASH, education, care and support interventions.
- **URUGUAY:** The ZIKV cell has supported the Uruguay CO in organizing C4D training with the MoH and PAHO to develop, through participatory consultation, the national Risk Communication and Community Engagement plan in the country. Although not yet affected by ZIKV, a recent dengue outbreak has confirmed the urgent need for improved preparedness and prevention activities through communication and community engagement.

### INNOVATIONS

- **RISK MODELING TOOL:** With Brazil, Colombia and Panama COs participating in the pilot, the risk modeling tool will help identify the spread of ZIKV using real-time entomologic, epidemiologic, weather, and mobility data and will allow users to focus prevention methods or communication on high risk regions during certain time frames. It is being created through a database of information collected from various partners on the topic of understanding and responding to emergencies and shocks.
- **U-REPORT:** ZIKV cell, with the support of the Global Innovation Centre and in partnership with IFRC, has launched the regional ZIKV U-Report initiative in seven countries (Brazil, Bolivia, Colombia, El Salvador, Guatemala, Honduras and Peru) to mobilise particularly young people, adolescents and health promoters in the fight against *Aedes aegypti*, sharing sensitive information to support prevention and promote participation in vector control campaigns. The promotional campaign to recruit U-Reporters was launched 28 March 2016.
- **SOCIAL MEDIA MONITORING:** A daily monitoring platform in collaboration with Brazil CO is collecting data to be used to improve communication campaigns being implemented at the country level throughout the region.

## RESEARCH

- UNICEF LACRO conducted a rapid appraisal of already existing and effective community-based vector control interventions on dengue to guide the development of plans at CO level. LACRO has launched a Request for Proposal to hire an academic institution to develop a more comprehensive literature review at regional and global levels.
- UNICEF LACRO is in the process of developing a C4D Monitoring and Evaluation Framework toolkit to support COs in implementing local research and/or knowledge, attitudes and practice baselines to more accurately measure C4D response results.

## 7. COUNTRY SITUATIONS

### BELIZE

#### *Situation*

- No ZIKV cases in Belize according to MoH as of 3 March 2016
- No local access to ZIKV testing raises concerns about possible unreported or undiagnosed cases
- Possible hotspots identified by MoH include Cayo District (Santa Elena, Las Flores, Salvapan, San Martin, Maya Mopan, St. Matthews, Camalote) and Belize District (San Pedro, San Mateo and San Juan)

#### *Response*

- Activation of MoH national plan; health care workers being trained in microcephaly detection and municipal authorities being sensitized
- Initiation of city council clean up campaigns in San Pedro and Belize City, two out of nine municipalities
- C4D training scheduled 7-8 April 2016 with ZIKV Cell support to enable municipalities to incorporate community engagement actions and risk plans into response actions
- Information posters and flyers on ZIKV disseminated to 1200 adults and children in nine municipalities
- Development underway of animated PSA/materials in cooperation with the MoH

#### *Coordination*

- Joint UN action on ZIKV discussed in March UNCT meeting chaired by the Resident Coordinator
- UNICEF, as chair of UNETT, finalized a summary of UN support to be shared with the government
- Ongoing and regular technical meetings with Ministry of Labour and local government

### BOLIVIA

#### *Situation*

- 15 autochthonous ZIKV cases in Bolivia reported by MoH as of 22 March 2016
- Red alert implemented in Santa Cruz de la Sierra and Portachuelo; Pando and Beni also considered priority areas

#### *Response*

- Joint actions agreed upon by MoH and UNICEF for prevention and care of ZIKV patients in seven priority municipalities in Beni: Trinidad, Riberalta, Guayaramerin, San Borja, Rurrenabaque, San Andrés and San Xavier involving health, education, protection and water sectors
- Community cleanup scheduled for April in Minga, Santa Cruz Dept.
- Technical assistance at the national level underway, especially regarding Communication Strategy and Social Mobilization
- Brochures to be distributed in Santa Cruz, Beni and Pando schools
- Key challenge is development of communication strategy for the indigenous peoples and language diverse Amazon region

#### *Coordination*

- UN system-developed Plan of Action for ZIKV



- Ongoing alliance between UNICEF and Save the Children for joint roll out of ZIKV response plans in the same geographical area with a focus on C4D, community engagement and prevention
- UNICEF continues to coordinate with MoH, WASH and Education sectorial groups

## BRAZIL

### Situation

- 6,776 microcephaly cases reported by Brazil MoH as of 26 March 2016; 4,291 went under investigation; of the 2,485 finished being investigated, 944 are potentially associated with ZIKV
- 85 per cent of all states have reported autochthonous cases according to the MoH; as the rainy season is ending, numbers of mosquitos should decline

### Response

- Government has plans to invest US\$ 166.5 million in the National Plan
- MoH reports that approximately 85 per cent of registered properties were visited to eliminate breeding grounds and instruct communities; approximately 1.6 million (3.4 per cent) were identified as having breeding grounds; second cycle results available at the end of March
- On 23 March, the MoH released a public bid of approximately US\$ 5.1 million for national researchers in the areas of vector control, diagnosis, prevention, and treatment of *Aedes aegypti*-related diseases
- UNICEF support was provided to government-led national plans and inter-agency priorities through three main strategies: Advocacy, Communications for Development, and Monitoring
- Training took place of over 1,800 people—1,192 key stakeholders and 608 children and adolescents—from 530 municipalities in priority regions to engage different local actors in coordination efforts to reduce mosquito breeding grounds
- Focus groups were conducted in Campina Grande (Paraiba) and Recife (Pernambuco), both with high incidences of breeding grounds and microcephaly cases; findings, to be released at the end of April, will help fine tune the messaging and community engagement initiatives promoted through UNICEF Seal
- Adolescents and other key stakeholders from large urban centers are receiving training on vector control
- Google is now a key partner in the response plan in Brazil, providing innovative technologies and support to build capacity and engagement initiatives focused on priority regions; UNICEF will start a study of socio-economic and human mobility data in order to predict possible behaviour related to *Aedes aegypti* diseases.
- UNICEF carried out 23 trainings on the new strategic action of the UNICEF Seal to fight against *Aedes aegypti*. Held in 18 locations with the participation of 2,258 people (730 adolescents) from 681 municipalities in 9 states (PI, CE, RN, PB, PE, PA, SE, BA and MG), the trainings equal 60 per cent of the total enrolled in the UNICEF Seal in the Semi-arid region and 77 per cent of total participants expected for this training cycle (Goal: sites (19); municipalities (884); states (10))

### Coordination

- UNICEF is conducting activities in close collaboration with the MoH and MoE as well as with PAHO and state and municipal governments
- UNICEF is participating in a UN Brazil Task Force on *Aedes aegypti* and is a member of several local and state level committees on *Aedes aegypti* and microcephaly

## COLOMBIA

### Situation

- 58,838 reported ZIKV cases in Colombia
- 703 municipalities below 2,200 meters above sea level (98 per cent of total) reported ZIKV cases
- The number of cases has decreased gradually since Epidemiological Week 5 of 2016; nevertheless, there has been a sharp increase in the number of GBV (381), possibly associated with ZIKV, according to SIVIGILA, EW 6, 2016, National Institute of Health
- 10,792 reported ZIKV cases in pregnant women; 977 confirmed by RT-PCR test; no cases of ZIKV-linked microcephaly confirmed by SIVIGILA EW 6, 2016, National Institute of Health
- Recent appearance of cases of flaccid paralysis in children under 15 years, possibly associated with the ZIKV virus; SIVIGILA surveillance system has been widened to include monitoring these cases

- Regions with the highest number of cases were, in decreasing order, Norte de Santander, Valle del Cauca, Huila, Tolima, and Atlántico and accounted for 53 per cent of all cases

#### Response

- Presentation of contingency plan by MoH and agreement on the following lines of cooperation: communication/mass media strategy, public health guidelines, information to schools and environmental interventions
- Contracted UNICEF C4D specialist with experience in transmissible diseases
- MoH approved C4D global key messages; UNICEF aims to reach an estimated one million people through social networks
- Seres de Cuidado strategy will promote community engagement
- A high-level conference will join vector-transmitted disease experts to address ZIKV, dengue and chikungunya
- Ongoing 4W mapping of actors, including planned prevention activities
- UNICEF and MoE are coordinating mobilization actions with Plan Foundation and Terre des Hommes reaching 354 schools and training 500 teachers on community engagement methods and solid waste management
- Ongoing monitoring of *Aedes aegypti* presence, the spread of related diseases, and Colombia's response to ZIKV
- Partnership with Google to boost ZIKV prevention campaign with a target audience of 18 million

#### Coordination

- UNICEF, WHO/PAHO, and UNFPA collaborating closely to support MoH
- UNICEF continues to lead the WASH Cluster and has promoted ZIKV as a priority point in its agenda
- As leader of the Education Cluster, UNICEF continues to facilitate coordinated action between education and health sectors
- UNICEF is actively contributing to the inter-agency technical communications group led by WHO/PAHO and United Nations Information Centre (UNIC)

## COSTA RICA

#### Situation

- 8 ZIKV cases confirmed in Costa Rica: 4 cases of autochthonous transmission and 4 imported cases
- All confirmed cases concentrated in the province of Guanacaste (Nicoya) according to the Epidemiological Bulletin No. 4, March 23, 2016, Ministry of Health of Costa Rica
- 31 hot spots identified in the 7 provinces with the highest incidences of dengue and chikungunya

#### Response

- MoH and Emergency Commission decreed a state of health emergency 25 Feb. 2016 in 31 counties due to ZIKV, dengue and chikungunya
- 31 hotspots were identified; local emergency commissions were activated
- Protocols are in place for disease prevention and control
- National promotion and communication strategy to prevent ZIKV, dengue and chikungunya has been developed and implemented
- Work strategy approved by MoH, MoE and the Costa Rican Social Security System (CCSS)
- Guidelines to protect pregnant women expanded
- Aerial spraying was increased in high risk areas; information provided to communities about cleaning and eliminating breeding sites
- During Easter, prevention measures were increased in areas of tourism to prevent new infections
- Under development by UNICEF: strategy and prioritization of short and long-term actions with the Office of the President, MoH and MoE to identify the added value of UNICEF cooperation; strengthening the production and dissemination of materials for children and adolescents; promotion of U Reports in communities

*Coordination*

- Meeting held with PAHO and Resident Coordinator to coordinate UNS response; OPS referenced communication materials to support national broadcasting processes
- Meeting held with the Office of the President about national communication strategy and required level of state support; priority areas identified as working with school-age children and mass media dissemination
- Meeting held with MoH to identify technical support and actions in high-risk communities

## CUBA

*Situation*

- 1 case of autochthonous transmission and 6 imported ZIKV cases in Cuba reported by MINSAP 26 March 2016
- Cuba officially reported the diagnosis of the first autochthonous transmission case of ZIKV
- Currently, 46 municipalities in 14 provinces report dengue transmission; no chikungunya cases have been reported in 2016 to date
- Of 168 municipalities in Cuba, 55 have high epidemiological risk

*Response*

- Implementation of the government-approved National Action Plan continues
- Medical students joined prevention efforts by delivering educational messages door-to-door in Havana; this effort is to be extended country-wide
- UNICEF agreed to support the printing of materials for the Cuida Tu Sueño national campaign to be distributed through the primary health care system promoting healthy behaviour, preventive care, and early diagnosis of ZIKV in pregnant women and women of childbearing age

*Coordination*

- The National Task Force, led by the MoH and with the participation of national institutions, continues coordinating the response
- UNICEF is coordinating directly with the MINSAP Centre for Health Promotion and Disease Prevention to execute the C4D campaign
- PAHO/WHO is leading the response within the UN with the collaboration of UNICEF and UNFPA

## EASTERN CARIBBEAN AREA

*Situation*

- Three countries under the Multi-Country Programme have reported locally transmitted ZIKV: Barbados, St. Vincent and the Grenadines, and Trinidad and Tobago

*Response*

- National awareness-raising activities led by MoH are ongoing in all 12 countries
- Regular visits to schools in St. Vincent & Dominica have included ZIKV risk identification
- A focus group will be conducted with adolescent girls and boys in Dominica to determine if their practices, knowledge and attitudes put them at risk
- UNICEF agreed to develop culturally relevant materials for school-aged children and adolescents
- Social media messages on ZIKV transmission methods, vector control, and breastfeeding will reach over 1,200 people on UNICEF ECA Facebook

## ECUADOR

*Situation*

- 83 ZIKV cases reported by the National Health Authority, including four pregnant women (both >17 weeks of pregnancy); 73 new cases suspected;
- Of the 66 confirmed cases for which information is available, 68 per cent were female between 20-49 years of age
- Confirmed cases were detected in 11 provinces, including in the Galapagos Islands; the highest rates were found in Manabí (25), Pichincha (19) and Guayas (16)
- The coastal region is the priority in autochthonous cases



### Response

- MoH identified ZIKV virus as a priority, declared it an epidemiological alert, and rapidly developed a plan of action
- UNICEF has undertaken to design the communication campaign at the local and national level
- UNICEF is providing information and building key messages in order to assess the level of risk through qualitative research involving focus groups on risk perception and key messages
- Regional Office and HQ supported local and national health care worker and partner capacity-building through workshops
- UNICEF, with the collaboration of LACRO and with HQ support, participated in a technical workshop with MoH officials and international experts to review the national communication strategy, advocacy and social mobilization

### Coordination

- UNICEF continues to coordinate with MoH and PAHO at the national level and with MoH and local government at the local level
- Weekly meetings with principal actors (MoH and PAHO) are organized as well as meetings with local authorities such as SENAGUA, MoH, SNGR, GADs, and Ecuadorian Red Cross

## EL SALVADOR

### Situation

- 5,620 reported ZIKV cases and 178 pregnant women suspected of ZIKV according to MINSAL Epidemiological Week Bulletin 09, 2016

### Response

- UNICEF is monitoring official figures and maintaining contact with PAHO
- UNICEF has a joint response plan (US\$ 145,5000) with PAHO/WHO, MoH, MoE, and members of the National Subcommittee on Water, Sanitation and Hygiene (PROVIDA and ASPRODE) focused on prevention through C4D and WASH vector control to create ZIKV awareness
- Response plan includes promotion of awareness of situations and attitudes that may negatively affect adolescent girls and women, especially those of reproductive age, that may jeopardize the implementation of interventions
- UNICEF maintains contact with the Embassy of Japan to coordinate the UNICEF response plan
- The National Humanitarian Team is providing operational support:
  - continued monitoring of the outbreak
  - continued information gathering on all aspects of the virus and its connection to infant malformation
  - focused action on communications about ZIKV prevention and the implications for pregnant women

### Coordination

- UNICEF has established regular coordination with MoH, MoE, PAHO and members of the National Subcommittee on Water, Sanitation and Hygiene (PROVIDA and ASPRODE) to coordinate the response plan

## GUATEMALA

### Situation

- 328 reported ZIKV cases in Guatemala in 2015/16, 53 in pregnant woman; 47 per cent of the cases are concentrated in four departments: Zacapa, Suchitepéquez, Quetzaltenango and Escuintla

### Response

- MoH maintains an institutional Yellow Alert and is rolling out an integrated plan for ZIKV, dengue and chikungunya, covering:
  - Information sharing for community staff, religious leaders, and the educational community
  - Dissemination of information on radio and local TV
  - Coordinated action with municipalities to disseminate messages and information
  - Fumigation of homes

- Elimination of mosquito breeding grounds through health personnel home visits
- Training of health personnel
- Developed protocol for epidemiological surveillance of ZIKV virus infections and congenital malformations with guidelines for clinical care of pregnant women
- Developed micro site in FreeBasics (Internet of Good Things) on "Basic information about ZIKV"

#### Coordination

- MoH presented an operational plan for a comprehensive approach to ZIKV, dengue and chikungunya to the international community
- UNICEF Guatemala is working closely with PAHO colleagues to coordinate actions
- UNICEF has been part of the extended dengue working group (UN system, World Vision, Red Cross, etc.) led by the MoH; the group now also addresses ZIKV and chikungunya

## GUYANA

### Situation

- 5 reported ZIKV cases in Guyana according to the MoH as of 15 March 2016; two linked to travel to and from Suriname
- Local public health experts revealed that ZIKV incidence has started to decline; Suriname continues to be a threat because of prior exposure and infection of at least one case from this country, and all neighbouring countries have high incidences of ZIKV
- The lack of national testing facilities and the CARPHA limit of 5 tests per week contributes to unreported/ underreported cases
- Risk of ZIKV infection continues due to poor health behaviours, a highly mobile population, and the tendency to self-diagnose and self-medicate with over-the-counter drugs

### Response

- Multi stakeholder coordination is being led by the National DRM agency and Civil Defense Commission to ensure an integrated approach for ZIKV response
- Drafted a ZIKV Communications Plan; distributed 5,000 insecticide treated nets - ITNs, with 75,000 in stock for further distribution to pregnant women and the public
- Continued UNICEF collaboration with Guyana Red Cross Society (GRCS), Civil Defense Commission and Ministry of Public Health (MoPH) in the joint training of 120 volunteers to combat ZIKV in three selected regions 1-3 April 2016

### Coordination

- Overall coordination for ZIKV response is now led by the national DRM agency as part of the Civil Defense Commission
- Civil Defense Commission volunteer corps are implementing Malathion community fogging
- MoPH has finalized communication materials and C4D strategy focused on vector control, currently aired through the national media and community outreach teams
- UNICEF has actively coordinated with the other resident UN agencies, especially PAHO/WHO, to ensure ZIKV response is prioritized by the Government of Guyana

## HAITI

### Situation

- 1,777 reported ZIKV cases according to MSPP as of 16 March 2016
- Four departments have recorded the highest number of cases: West, North, Artibonite and Centre

### Response

- Presentation of strategic plan by MSPP with six components: i) epidemiological surveillance, ii) promotion and social mobilization, iii) family planning, iv) vector control, v) health care, and vi) coordination and monitoring

- Estimated national response budget plan: US\$ 1 million; the MSPP hopes to raise the funds through its partners
- Integration of ZIKV surveillance into the health information system
- Training for health professionals and institutions
- Delivery of prevention messages through mass media
- Continued UNICEF support in community engagement and community for development (C4D)
- Development of a crisis communication plan with communication materials and a guide for community action broadcast on TV and radios
- Establishment of local partnership between health journalists, community media and NGOs; support groups for pregnant women have been reactivated; support has been provided to communities through sensitization sessions in churches, schools and other locations
- Implementation of community mobilization activities: home visit support for women of child bearing age and especially pregnant women; support to women's clubs; community meetings; sensitization sessions on vector control measures for sanitation committees members and support to sanitation/ cleaning community days
- Refresher trainings supported for health workers in ZIKV virus infection management, specifically in the four departments with high prevalence of ZIKV cases

## HONDURAS

### *Situation*

- 16,590 reported ZIKV cases in Honduras, 57 GBS cases, and 185 pregnant women suspected to have ZIKV according to the MoH 29 March 2016

### *Response*

- National response is coordinated by the President of the Republic with the collaboration of MoH, MoE and municipalities
- Development of a comprehensive plan to reduce ZIKV, dengue and chikungunya by MoH
- The plan requires US\$ 15 million in four strategic areas: entomological control (36 per cent), epidemiological surveillance and laboratory (2 per cent), treatment of patients (60 per cent), and communication and social mobilization (3 per cent)
- National Humanitarian Network is providing operational support for cleaning campaigns, awareness, and education with participating partners UNICEF, PAHO-WHO, UNFPA, ADRA, Honduran Red Cross, IFRC, GOAL, Plan International, Save the Children, and World Vision
- UNICEF has reached more than 200,000 people with 27 publications on Facebook and Twitter
- UNICEF is validating five radio and TV spots and five animated cartoons; following PAHO guidelines, UNICEF will include an additional spot on care of pregnant women
- UNICEF agreed to develop two illustrated flyers on prevention and a follow-up tool for schools to monitor mosquito breeding grounds
- An online ZIKV self-training module for teachers is on track
- UNICEF will work in advocacy and awareness at the municipal level through a communication and education strategy in the Department of Olancho, reaching family counselors, religious leaders, children, parents, teachers, community leaders, community cleanup committees, and children communication networks
- UNICEF is actively engaged with the MoH and MoE; the Ministry of Communication Strategy; the Department of Children, Youth and Family (DINAF); Municipal Programmes for Children, Adolescents and Youth; and the National Telecommunications Commission to disseminate messages via cell phone
- Communication material and the capacity building approach is being shared with USAID and Johns Hopkins University for resource mobilization and evidence generation
- UNICEF is engaging with the National Association of Producers and Exporters of Coffee as a key local partner for disseminating communication material
- UNICEF will continue to develop a baseline of knowledge, attitudes and practices in the prevention and control of vector-borne diseases

## JAMAICA

*Situation*

- One autochthonous ZIKV case reported in Jamaica as of 15 March 2016 by the MoH
- The new government has made ZIKV prevention a major priority
- The government of Jamaica has established ZIKV testing facilities at the University of the West Indies laboratory and UNCT is reviewing the UN ZIKV Emergency Work Plan
- A UNICEF key action is convening partners to draft and implement strategy to reach vulnerable women and adolescent girls and advocate for ZIKV response strategy

*Response*

- PAHO has drafted a Jamaica UN ZIKV Emergency Work Plan with roles and responsibilities outlined for each UN agency
- A strong C4D approach among general population is being undertaken
- Mass and social media messages have been disseminated and information has also been made available in schools and health facilities
- Vector control continues in vulnerable communities; eradication of larval habitats, a collaborative effort between the MoH, local government and community development, is on going.
- UNICEF will engage in communications for development activities
- Prevention, vector control and mitigation plans pending
- Advocating with government for shared strategic plan
- Convening partners in government and civil society to outline a C4D strategy on ZIKV prevention/mitigation among women of child bearing age with a focus on adolescent girls in vulnerable communities

## MEXICO

*Situation*

- 183 reported ZIKV cases in Mexico as of 25 March 2016, 42 of which were autochthonous cases reported by Epidemiological Surveillance System
- Still in early days of detection of new cases
- 165 of 183 reported cases (90 per cent) are concentrated in the states of Chiapas and Oaxaca

*Response*

- Authorities are focusing on prevention of the spread of the ZIKV among pregnant women through additional training to gynecologists
- The MoH has introduced new capacity for monitoring microcephaly and GBS
- Civil Protection is coordinating preventive efforts, following the lead from MoH regarding messages and content
- The National Center for Disaster Prevention (CENAPRED) has developed materials, including info graphics, which have been released via Facebook and other channels
- The MoH will strengthen the mass media campaign already in place for dengue and chikungunya to include ZIKV
- The UNICEF response focuses on supporting government prevention efforts through targeted C4D activities, especially to vulnerable and indigenous communities
- UNICEF is working with CENAPRED to generate child-friendly versions of prevention materials
- Dissemination (five times daily since 27 Feb. 2016) of two radio PSAs through ten local radio stations in Chiapas reaching up to four million people
- Dissemination of a formal petition through 57 radio stations in 30 Mexican states is underway through an alliance with the Mexican Network of Educational and Cultural Radios and TVs; estimated audience is up to 85 million people
- As of 24 March 2016, UNICEF had made 64 posts via twitter resulting in 2,480,000 impressions to 1,140,920 accounts
- Via Facebook, 106 posts have been made, reaching 55,416 accounts; posts include a video spot of Elmo and Sesame Street developed in partnership with UNICEF to explain prevention activities

- UNICEF is also disseminating prevention messages to 40,400 U-reporters, including 1,000 who have signed up as ZIKV prevention activists
- SMS messages on prevention are already being sent to 1,588 pregnant mothers participating in Prospera Digital, a UNICEF-supported 2-way RapidPro messaging programme to provide useful information to pregnant mothers as part of the Prospera conditional cash transfer programme; the platform will reach 5,000 pregnant women when it is brought to scale by year end
- UNICEF is engaging with CDI, the branch of the government responsible for policies with a focus on the indigenous population, for a targeted strategy to disseminate prevention messages through 20 radio stations and local radio hosts to potentially reach 6.6 million people in rural and indigenous communities
- UNICEF will support the creation of C4D materials for the education sector with culturally appropriate messages for school-based vector control activities

#### *Coordination*

- WHO/PAHO led coordination within UNCT on ZIKV in support of national efforts
- UNICEF has agreed with WHO/PAHO to work following WHO/PAHO technical guidelines and to respond to the request for support in C4D
- UNICEF has established regular meetings with Civil Protection (PC) to coordinate the response, including advice to CENAPRED on materials for children and adolescents

## PERU

#### *Situation*

- Four reported ZIKV cases in Peru as of 7 March 2016 according to MoH

#### *Response*

- Implementation by the MoH of multisectorial support to the country level of regional governments and municipalities in 20 departments and a protocol for sentinel surveillance of microcephaly in 32 major hospitals in the country located in 19 high risk departments
- UNICEF continues to support the MoE in the development of training materials for teachers and key messages for students
- UNICEF Peru is tailoring communication messages to the regions of Amazonas and Loreto based on C4D qualitative research
- UNICEF will include U-Report as part of its strategy
- A strategy to provide technical assistance to MoH and MoE has been validated.
- UNICEF is contributing to the development of a care protocol for children born with microcephaly

#### *Coordination*

- An interagency group has been formed which includes PAHO, UNFPA, UNDP, OCHA, and UNICEF
- UNICEF will explore possible joint actions with the Peruvian Red Cross and Scouts Association
- Coordination with local multisectorial platforms, MoH, and MoE to engage educational communities against ZIKV, dengue and chikungunya; implementing partners will be local NGOs in Loreto and local health services in Amazonas

## SURINAME

#### *Situation*

- 1,660 reported cases of ZIKV in Suriname as of Dec. 2015 according to the Bureau of Public Health, 1 March 2016
- The national surveillance system is indicating a decrease in new cases over the past three weeks

#### *Response*

- UNICEF and PAHO are assisting in the communication campaign; billboards were placed in Paramaribo, a ZIKV website has been continuously updated, and brochures have been distributed house by house



- Government allocation of approximately US\$ 1 million for vector control and medical treatment for ZIKV response
- To date, more than 80 per cent of the coastal population (Paramaribo, Wanica, Marowijne, Commewijne, Saramacca, Coronie, and Nickerie) is covered
- More than 70,000 ZIKV prevention folders (35,000 sponsored by UNICEF) were distributed in these communities, and 8,000 ZIKV prevention folders for pregnant women were disseminated on 4 March 2016 via 3 newspapers (*Times*, *DWT*, *Dagblad Suriname*)
- The 7-minute ZIKV infomercial was aired on Apinti TV in January and February 2016
- UNICEF, in close collaboration with PAHO, is supporting MoH by providing key messages
- MoH has worked with the MoRD to mobilise District Commissioner and local communities in urban and coastal areas to disseminate communication materials, eradicate mosquito breeding sites and conduct cleaning campaigns in communities
- UNICEF will provide support to MoH in communication with C4D actions at the local level with public servants (health, social inclusion and education) and local actors (community leaders and churches) focusing on protection of pregnant women and vector control

#### Coordination

- UNICEF and PAHO/WHO advocated for the establishment of a ZIKV response coordination mechanism led by the Bureau of Public Health

## URUGUAY

#### Situation

- Uruguay was free of dengue, chikungunya, and ZIKV until Feb. 2016 when an outbreak of dengue occurred with 23 autochthonous cases
- UNICEF is providing support to MoH in the area of C4D

#### Response

- MoH and other governmental institutions are carrying out a national campaign and various mobilization activities towards vector control
- Together with MoH and National System for Emergencies (SINAE), UNICEF is preparing a two-day workshop on C4D in emergencies on social mobilization and communication in ZIKV preparedness

## VENEZUELA

#### Situation

- 352 confirmed cases out of 16,942 suspected as of 10 March 2016 according to PAHO/WHO
- 153 confirmed cases in pregnant women; 235 out of 578 GBS cases presented symptoms of ZIKV (WHO, 24 March 2016); no reported microcephaly cases as of 10 March 2016
- A total of ten cases with other neurological disorders and a case of facial paralysis were confirmed positive for ZIKV by RT-PCR

#### Response

- The government approach is targeting ZIKV along with dengue and chikungunya
- Distribution of some 8,000 bottles of immunoglobulin and albumin for potential cases with neurological complications
- Fumigation of 256,000 homes in 18,184 communities and elimination of 28,000 larval habitats in the capital
- Organisation of informative sessions/talks in Community Health Areas and schools
- Addition of ZIKV to topics that the public can seek information about through the helpline (0-800VIGILAN) that was activated for the 2015 chikungunya outbreak
- Prevention messages to reach millions, mainly through the MPPS official website and social media
- Joint preparation by UNICEF, PAHO/WHO and MoH of a response plan focused on prevention through a C4D and External Communication campaign with a potential audience reach up to 4 million
- Dissemination by UNICEF of ZIKV virus information, symptoms and treatment through the CO website and social media, reaching an audience of almost 400,000

## 8. FUNDING

UNICEF is appealing for total of US\$ 13.8 million, which includes US\$ 8.8 million for the LAC response and \$US 5 million for global outreach efforts in preparedness, research and development.

Against the Humanitarian Action for Children (HAC) requirement of US\$ 8.8 million for the Latin America and the Caribbean, UNICEF LACRO has received US\$ 1.99 million (30.6 per cent) and has reallocated US\$ 711 thousand from regular resources to meet the immediate humanitarian needs of children and families.

Additional funding is required in order to support national responses for the countries facing the explosive spread of ZIKV. Needs will be regularly reassessed as the situation evolves. Due to the complexity of an epidemic in multiple countries with varied needs, flexible resources at the regional level will be essential to reach the most disadvantaged communities.

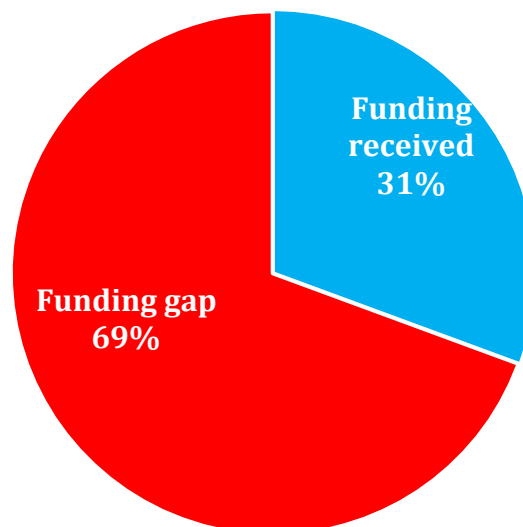
Latin America and the Caribbean	2016 Requirements (US\$)	Regular Funds reallocated US\$	Funds received US\$	Funding Gap	
				US \$	%
Social mobilization and response activities in affected countries	4,560,000			<b>6,114,015</b>	<b>69</b>
Rapid Response Teams	2,520,000	710,985	1,995,000		
Regional support to countries	1,740,000				
<b>Total</b>	<b>8,820,000</b>	<b>2,705,985</b>			

## ZIKV LACRO Funding Gap

**Funding Needs: 8.82 m USD**

**Funds Received: 2.7 m USD**

**Funding Gap: 6.12 m USD**



UNICEF LAC ZIKV VIRUS SITREP



Next SitRep: 22/04/2016

[http://www.unicef.org/appeals/Zika\\_response.html](http://www.unicef.org/appeals/Zika_response.html)

Who to contact for further information:

**Andres A Lopez**  
Regional Chief of Communication  
LACRO  
Panama  
Tel. +507 301-7484  
Email [aalopez@unicef.org](mailto:aalopez@unicef.org)

**Stefan Stefansson**  
Regional Chief of Partnerships  
LACRO  
Panama  
Tel. +507 301-7489  
Email: [sstefansson@unicef.org](mailto:sstefansson@unicef.org)

**Donatella Massai**  
LACRO ZIKV Cell Coordinator  
Panama  
Tel. +507 301-7456  
Email: [dmassai@unicef.org](mailto:dmassai@unicef.org)

