



Zika virus (ZIKV)

Latin America & Caribbean
 Situation Report #11
 15 February 2017



RESPONSE HIGHLIGHTS

- UNICEF has worked with government and non-government partners to ensure pregnant women in high-risk areas receive quality information on how to prevent ZIKV, including avoiding sexual transmission. Using mass communication, **166 million people across Latin America and the Caribbean have been reached with key preventive messages.**
- UNICEF in collaboration with partners has started to **develop non-medical Care and Support activities in Honduras, Guatemala, Dominican Republic and El Salvador.** These activities will be documented, forming the base of a minimum package of care and support model. As an example, UNICEF has started to support 22 families with babies affected by Congenital Zika Syndrome in the Dominican Republic.
- UNICEF has used U-Report to ensure **1,000 U-Reporters across Latin America and the Caribbean have timely and relevant information on ZIKV** including symptoms, how to prevent mosquito and sexual transmission, treatment and affected babies.

SITUATION OVERVIEW

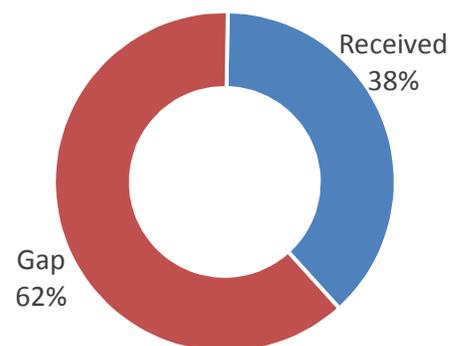
742,942 Zika cases (suspected and confirmed) reported by countries and territories in LAC. (PAHO, 9 February 2017)

2,611 cases of Zika Congenital Syndrome associated with Zika Virus reported by countries and territories in LAC in 18 countries. (PAHO, 9 February 2017)

3 LAC countries have reported evidence of person-to-person ZIKV transmission, probably via a sexual route. (WHO, 2 February 2017)

Funding

UNICEF financial requirements for 2017 is \$16,996,000. There is a current funding gap of **\$10.6million**



UNICEF RESULTS	Target 2017	Results 2017
Target population reached with key risk communication messages through multiple communication channels.	200,000,000	166,920,501 (cumulative since February 2016)

MORE THAN A NUMBER

Photo: Teachers in Ecuador are being directly trained by UNICEF in the use of educational material for use from 4 to 15 years of age to help create awareness and teach students about the Zika virus and ways to control it.

1. SITUATION OVERVIEW¹



- To date, 75 countries and territories around the world report continuing mosquito-borne transmission; **46 of these are in the Latin American and Caribbean (LAC) region.**
- **Mexico reported a confirmed case of congenital syndrome associated with ZIKV infection for the first time.** In the last two weeks, Argentina, Colombia, the Dominican Republic and Guatemala, updated their number of cases of Congenital Syndrome associated with ZIKV virus infection, which show an increase.
- Bolivia reported on the confirmation of autochthonous cases in Beni and Pando, in addition to the ongoing outbreak in Santa Cruz.
- Jamaica has recorded its first “probable” case of ZIKV related microcephaly in a new born, but this has not been confirmed by PAHO.
- UNICEF works with epidemiological data from PAHO. The latest cumulative cases report (9 February 2017) can be found [here](#), whilst the latest epidemiological update (26 January 2017) can be found [here](#).

HUMANITARIAN RESPONSE STRATEGY

UNICEF is responding to raise awareness of prevention measures for families and their children potentially affected by Zika as well as on increased access to reproductive and sexual health services, especially for teens, pregnant women and women of child-bearing age. UNICEF is also prioritizing advocacy and programming that aims to ensure that children affected by the ZKV receive adequate non-medical care and support and thus fulfil their right to full development and inclusion.

Drawing on its expertise in Communication for Development and using multi-sectoral approaches for children with disabilities, UNICEF is working to build the knowledge and capacities of families and communities to care for children affected by CZVS. When it comes to prevention, UNICEF is working with partners to increase the demand for diagnostics, particularly amongst the pregnant women and other at risk groups. This is aligned with the global UNICEF engagement that aims to fast track the development of vaccines and rapid diagnostic tests. When it comes to non-clinical Care and Support - which central to the UNICEF Global strategy - UNICEF is prioritizing the provision of holistic care and support services to families affected by Zika, including care for children with congenital Zika virus syndrome (CZVS) through psychosocial support, social protection, early childhood development interventions and nutrition support. Drawing on its expertise in Communication for Development and using multi-sectoral approaches for children with disabilities, UNICEF will work to build the knowledge and capacities of families and communities to care for children affected by CZVS.

2. REGIONAL ACTIVITIES

2.1. COORDINATION AND LEADERSHIP

- UNICEF LACRO continues to work with partners at a regional, national and global level to coordinate the response. Regular meetings with PAHO, USAID and other partners contribute to an efficient response. UNICEF LACRO continues to offer support to other regions facing ZIKV infection.

¹ Sources: Panamerican Health Organization (PAHO). Regional Zika Epidemiological Update (Americas), 09 February 2017. Washington, D.C.

(http://www.paho.org/hq/index.php?option=com_content&view=article&id=11599&Itemid=41691&lang=en)

Panamerican Health Organization (PAHO). Zika cases by country (http://ais.paho.org/phis/viz/ed_zika_cases.asp), as consulted on 13 December 2016.

World Health Organization (WHO). Situational Report 02 February 2017. Washington, D.C.

- UNICEF LACRO and PAHO have agreed to jointly develop and co brand “guidelines for care and support of children affected by Zika Congenital Syndrome”. The consultation process has started and the final version is expected for April 2017.

2.2. TECHNICAL SUPPORT & CAPACITY BUILDING

- UNICEF LACRO is in the process of designing a resource package based on the identification of essential components required to promote and undertake non-medical Care and Support interventions by Ministries of Health, Social, Education and other key NGO actors across the region, focusing on providing timely care to young children affected by the ZIKV infection and other congenital malformations, through specific family support and involvement.
- “Bespoke” training has been provided to UNICEF Honduras and Dominican Republic to build capacity for Care and Support actions for children affected by the ZIKV and other congenital malformations.
- As part of our efforts to ensure synergies and complementarities between key regional stakeholders, UNICEF is advising on the development of technical documents from the different partners involved in ZIKA response. For example, we have shared guidelines and methodologies on KAP (Knowledge, Attitudes and Practices) studies with Save the Children and IFRC to ensure all partners are working with the same information.

2.3. COMMUNICATION

- Alongside the Global Innovation Centre, UNICEF LACRO has developed a ZIKV Info Centre, accessible via U-Report with detailed information on ZIKV symptoms, transmission, prevention, treatment (or lack of) and affected babies. It is available in English, Spanish and French, and is being promoted on social media platforms globally. UNICEF LACRO has been able to respond to individual questions that have been received. One U-Reporter wrote a message to say: *“Thank you very much my friends, I have received important information about Zika.”*

3. PROGRAMME RESPONSE AT COUNTRY LEVEL:

3.1 INTEGRATED RESPONSE ACTIVITIES

Detection

COs across the region continue to advocate for improved detection mechanisms for both ZIKV infection and for children with Congenital ZIKV Syndrome. On clear example is with UNICEF Dominican Republic who has been working with DIGEPI (The Ministry of Health’s Epidemiological Directorate) to promote proper monitoring and follow-up of newborns with Congenital ZIKV Syndrome. UNICEF has partially financed two studies to support this work, i) the revision of microcephaly cases in hospital registers at national level and ii) cohort study for children with no apparent Zika Congenital Syndrome 3-months’ time-of-life monitoring for development anomalies detection.

Prevention

Despite the new number of cases of ZIKV falling in much of LAC since the last Situation Report, prevention activities remain hugely important. COs utilize different strategies to fulfil the prevention component of the response. UNICEF in Mexico and Paraguay continue to support national mass media campaigns on ZIKV prevention, whilst UNICEF Bolivia supports cleaning campaigns in schools.

UNICEF continues to work in schools and with Ministries of Education across the region. In Colombia, UNICEF continues to support the ‘Zika-Protected and Protective Schools’ initiative which in just over six months has educated 150,000 girls, boys and adolescents about ZIKV. Meanwhile, UNICEF Ecuador has utilized school-based learning activities on personal protection and prevention of ZIKV to reach 8,500 children, and has also trained 350 teachers to support this initiative. In the Dominican Republic, UNICEF is working alongside MINERD (Ministry of Education) and local NGOs Pastoral Materno Infantil (PMI) and Fe y Alegría to work with adolescents to bring about household behavioural change, bringing together teachers, students, tutors and parents.

UNICEF continues to identify opportunities to mainstream ZIKV activity into programmatic work to ensure it is sustainable. In Bolivia, UNICEF has been working with local governments to ensure an integrated approach to the prevention, surveillance and control of dengue, chikungunya and ZIKV including coordinated campaigns to promote the collection of unusable items, to stop them becoming mosquito breeding sites.

UNICEF Jamaica has been working with the National Family Planning Board (NFPB) on prevention of sexual transmission of ZIKV. As well as placing three ZIKV PSAs on local television messages, the NFPC has also printed posters promoting ZIKV prevention, which includes messages on personal protection, household prevention and safer sex in the context of ZIKV.

Care & Support

2017 will see a strong emphasis on Care & Support activities, ensuring that UNICEF provides child care and family support for children affected by ZIKV syndrome and other congenital malformations, in order to promote their right to full development and inclusion. COs such as Suriname, Peru, Bolivia, Belize, Honduras, Guatemala and El Salvador are in the process of working on plans with partners and government agencies to update protocols, strengthen systems and undertake capacity building in this area. Several COs are undertaking mapping exercises of actors involved in Care and Support work, such as in Peru, Honduras, El Salvador and Guatemala, while the Dominican Republic has already completed an initial mapping process

In the Dominican Republic, UNICEF's Education Programme is coordinating actions to prepare specific materials for family-based early stimulation, and is planning training and guides to support this activity to be launched later in 2017. In addition, UNICEF is assisting in the design of an inter-sectoral protocol for Non-Clinical Care and Support actions, along with a primary response to support families with children born affected by ZIKV. Volunteers by the Pastoral Materno Infantil are gathering and supporting, emotionally and logistically, families of lower-income to access specialist evaluation and early child stimulation. As of end of January, 22 families have been reached and supported. This experience will be the base for UNICEF's next coming C4D campaign that will involve both social mobilization and strong advocacy at policy level.

Knowledge Management

Gathering evidence on ZIKV, on barriers to undertaking prevention activities and for understanding what Care and Support activities are required are a priority for UNICEF. This is why the KAP (Knowledge, Attitudes and Practices) studies that are being planned by COs such as Honduras, Guatemala, El Salvador and Dominican Republic are so important. In Ecuador, UNICEF has directly participated in door-to-door visits of pregnant women and surrounding families to understand how the campaign being run by the Ministry of Health is being viewed by these women and their families. In Dominican Republic programmes will be monitored using community-based information. There is a two phase approach, firstly understanding household requirements for preventing ZIKV and secondly focusing on schools.

Coordination

Coordination at national and local level with key partners, including government stakeholders, is fundamental to ensure an efficient and effective response. Examples of note since the last Situation Report include UNICEF Colombia's work with the Imix Foundation and World Vision to provide technical support to Health and Educational Secretariats in various municipalities at high-risk of ZIKV. In Ecuador, UNICEF has continued its support of the Health Stakeholder Roundtables, where health districts, representatives of institutions (e.g. Red Cross, Fire Department, Local Health Committees etc.) work together to agree concrete and immediate actions regarding vector control and ZIKV prevention.

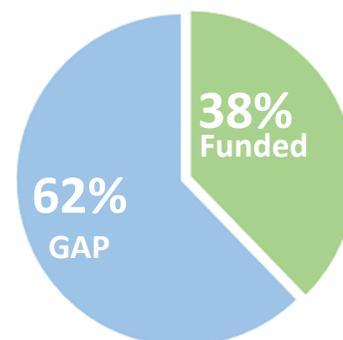
As part of the USAID funded ZIKA response intervention in Guatemala, Honduras, El Salvador and Dominican Republic, extensive efforts have been done to establish coordination mechanisms with partners, ensuring a complementary approach and more efficient use of resources, especially at community level where activities are being implemented.

On the 24th January 2017, the Plurinational State of Bolivia enacted a **Law for the Prevention and Control of Dengue, Chikungunya and Zika** which aims to strengthen actions of the Integrated Management Strategy for the Prevention and Control of Dengue, Chikungunya and Zika 2016-2018 (Supreme Decree No. 2670, 3rd February 2016). In response the Epidemiology Unit of the Ministry of Health (MoH) is promoting the new Law for the Prevention and Control of Dengue,

Chikungunya and Zika and is signing agreements with municipal governments to ensure compliance with the law. UNICEF Bolivia is supporting the MoH to implement control and prevention actions, specifically disseminating communications, awareness raising and advocacy.

4. FUNDING

Activity	Funding Received (US\$)	Funding Gap (US\$)
Contribute to early diagnosis of ZIKV infection and complications through advocacy and awareness raising	6,526,596	10,643,118
Prevent ZIKV through informing and engaging communities		
Mitigate the impact of ZIKV on children and families		
Contribute to research on effectiveness of prevention measures		
Coordinate actions across sectors to support the national government response		
Total requirement (\$US)		



UNICEF recently received an funding from Google (\$155,163) and the funds have been allocated to countries with priority actions. The current funding gap for UNICEF for its annual work-plan in LAC stands at \$10.6million.

5. MONITORING AND EVALUATION

The 2017 Humanitarian Response has a refreshed set of indicators. However, there are some indicators that are cumulative from 2016. Results are therefore displayed in two tables for ease of understanding.

UNICEF RESULTS	Total Results (cumulative since February 2016)
Target population reached with key risk communication messages through multiple communication channels.	166,920,501
Target population reached with social mobilization and interpersonal communication Zika virus prevention sessions.	246,619
Pregnant women benefited with quality counselling sessions to prevent Zika virus infection.	1,200

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