

UNICEF Bolivia COVID-19 Situation Report No. 2



REPORTING PERIOD: August to October 2020

HIGHLIGHTS

- In Bolivia, the number of cases continues to increase significantly, affecting the entire national territory. The peak of the infection curve was reached in the last week of July, with more than 2,000 confirmed cases per day. In September, there is a decline in confirmed cases according to official data. The last official report dated 10 October reported 1,894 cases in one week.
- In August, a social crisis broke out due to the postponement of the presidential elections. The protests mainly materialized through roadblocks across the country. Bolivia went through social unrest with roadblocks, which had an impact on the provision of medical oxygen and other supplies for COVID-19 patient care in health facilities in the western region of the country.
- As of September, the post-confinement and community health surveillance phase started. Even with closed borders and no in-presence school activity, measures such as hand washing, physical distancing and wearing face masks are promoted.
- On 18 October, the general elections were held, mobilizing 7.1 million voters. Authorities of the Ministry of Health worked together with the Supreme Electoral Tribunal to implement biosafety measures to prevent contagion during election day.

SITUATION IN NUMBERS: As of 5 November



142,201

laboratory-confirmed cases, 6.16% of the total number of cases reported among children and adolescents*.



8,768 deaths, with a mortality rate of 6.2% *.



2,870,794 children impacted by school shutdowns.



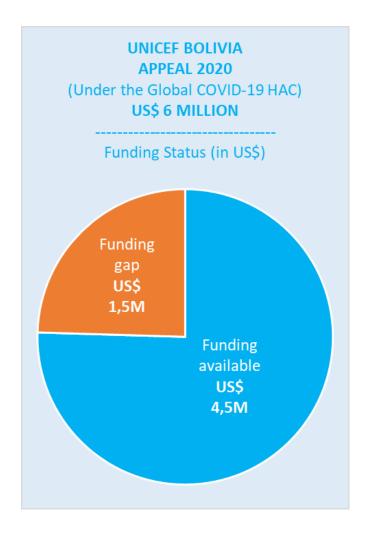
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out of 36 Indigenous Nations highly vulnerable to ethnocide.

*Ministry of Health

UNICEF's response focused on:

- 6,286 health workers have been provided with personal protective equipment (PPE) for ensuring the continuity of health services.
- 26,534 people in need were provided with basic supplies for personal hygiene and to support the prevention of COVID-19.
- **73,874 caregivers** received messages on the promotion of breastfeeding and information on nutritional practices for young children with the aim of preventing malnutrition.
- **22,754 people** received psycho-emotional assistance and information on available support services to reduce anxiety and emotional concerns. 51% were referred to a mental health specialist.
- 597,743 children and adolescents accessed distance learning activities, and 7,991 teachers were trained on digital skills, to provide better online education.
- 19,317 people interacted with experts on topics related to COVID-19 prevention and child and adolescent care through online sessions and U-Reporters.



SITUATION OVERVIEW AND NEEDS

While confirmed cases of COVID-19 have declined since September, the pandemic still has a negative impact on the well-being of Bolivian children. Children and adolescents continue to experience affected access to essential health, education and protection services.

Many healthcare facilities, mainly in cities, interrupted their activities, temporarily closed their doors or restricted people's access to primary healthcare, including vaccination, which has declined throughout the country, particularly in urban areas, with 2 cases of measles reported in Santa Cruz. In addition, according to data of the Expanded Immunization Program in 2020, in the city of El Alto with nearly 1 million inhabitants, seven out of every 10 children did not receive the recommended vaccines for their age, and nine out of every 10 girls aged 10 to 15 years did not complete the Human Papillomavirus (HPV) vaccination scheme. 65 per cent of older adults, pregnant women and people with chronic diseases are not protected from seasonal influenza.

The National Government anticipated the closure of the school year on 2 August, arguing that the State did not have the capacity to guarantee access to distance education, especially in rural areas. The decision of the Ministry of Education, Sports and Culture entails that all students at the preschool, primary and secondary school levels automatically pass to the next grade. Despite the efforts made so far by the Ministry of Education, Sports and Culture to promote virtual education as one of the educational modalities, there are major

challenges in reaching the entire student population. The lack of universal internet connectivity, the limited access to digital devices and the lack of digital skills in both teachers and students have been the main challenges for the provision of virtual education. An opinion survey conducted by UNICEF's U-Report platform reveals that four out of every 10 adolescents or young people indicate that they are not receiving classes through any internet platform. Of those who receive virtual education, 93.2 per cent indicate that they are learning "nothing", "almost nothing" or "more or less", regardless of the type of school they attend, either private or public schools. The limited access and poor quality are not the only challenges in the education sector; being out of school also increases the risk of teenage pregnancy, sexual exploitation, child labor, child marriage, violence and other threats¹. The longer the children stay out of school, the less likely they will go back². Up today there is no decision about when schools will reopen.

There is growing evidence that water, sanitation and hygiene (WASH) services in schools can have a significant positive impact both on children's health and on their school performance. Washing one's hands with soap is one of the most powerful hygiene behaviors that help prevent infectious diseases, including COVID-19. However, more than 1,000 schools in Bolivia do not have adequate water facilities. Data on school infrastructure were last collected in 2013. Unfortunately, these are the only data available at the moment.

UNICEF has been monitoring the situation of ten social child welfare services (DNAs for its acronym in Spanish) in the departments of La Paz, Pando, Cochabamba, and Santa Cruz. In the first month of the quarantine, it was noted that, on average, DNAs were serving at 22.3 per cent of their capacity³. In the second report (15 May), the number of cases dealt with increased to an average of 34.1 per cent. Currently, the services of the social child welfare offices are at 79 per cent and still have limitations.

The reasons for the limited capacity of DNAs are as follows: (i) services provided only by the emergency teams and sometimes only in capital districts. (ii) insufficient availability of biosafety equipment; only 16 per cent of the DNAs offer protective equipment, which affects the capacity to provide in-person services. (iii) the cases of contagion among personnel combined with the need to isolate suspected cases dramatically limit the availability of staff. (iv) lack of transportation, because they do not have vehicles or available vehicles are assigned to other activities not related to the DNA. (v) weakness in inter-institutional coordination and work with public courts, which have been dealing only with criminal cases, leaving many processes for children and adolescents suspended.

Concerns regarding this novel virus can make children and adolescents and their families anxious. Children show their emotions in different ways, and both parents and children must have information and tools to cope with the stress caused by the pandemic and the quarantine. If parents and caregivers are excessively worried, the children's anxiety may become worse. The UNICEF-supported "Safe Family" helpline has seen an increase in the calls from children and adolescents since it was established in April, accounting for 37 per cent of calls. Most of the children who call are concerned about COVID-19 and the impact it has on their families, or they are suffering and witnessing domestic violence.

In Bolivia, from the beginning of the pandemic to date, the ethnic self-identification variable is not considered in the official epidemiology data, which means that there is no accurate information on the impact of the pandemic on the indigenous population. The information on COVID-19 cases in indigenous territories is partial and produced by local organizations, but it is not systematized. Due to the impact of the pandemic, indigenous communities have limited access to education, protection and health services. Some Departmental Governments provide medical assistance to indigenous people through mobile brigades and identified limitations of the health system at the service of indigenous people.

¹ https://www.alliancecpha.org/en/COVID-19andschools

² https://www.alliancecpha.org/en/system/tdf/library/attachments/4 evidence synthesis covid-19 fp education final.pdf?file=1&type=node&id=38841

³ This result was obtained from the calculation of the weighted average number of cases attended during the first month of quarantine over the total number of cases estimated to be addressed by the DNAs in normal conditions: without mobility restrictions, with all staff members and in all offices.

The health emergency has brought to light the need for the State, at its different levels, to have social protection mechanisms for children and their families. UNICEF developed a study that analyzed the socioeconomic impact of COVID-19 on households with children and adolescents, estimating that the drop-in income because of the quarantine would generate an increase in poverty by a percentage that varies between 8 per cent and 20 per cent ⁴.

HUMANITARIAN LEADERSHIP, COORDINATION AND STRATEGY

The Humanitarian Country Team (HCT) has activated the thematic coordination mechanisms in collaboration with the National Government and has participated in the National Emergency Operations Committee (COEN). In the last three months, forest fires have affected eight departments of Bolivia and the government declared a national disaster on 8 October. The HCT promoted the analysis of the situation and planning for the response in the sectoral thematic groups. The actions planned for dealing with the forest fire emergency consider the current COVID-19 pandemic.

The WASH thematic group led by UNICEF and within the framework of the HCT, promotes the use of the municipal multi-sector vulnerability map. This tool is regularly updated and disseminated at the regular meetings of the thematic group for decision making regarding the pandemic response.

UNICEF Bolivia also coordinates the health and education roundtables of the Group of Partners for Development in Bolivia (GruS). This platform, made up of bilateral, multilateral and intergovernmental organizations, has played a relevant role in strengthening the mechanisms for coordinating and responding to the pandemic. In the Health Platform, it was possible to socialize the Response Plan for control and surveillance of the COVID-19 pandemic among the donors from which coordination mechanisms for implementation of the Plan were established. Likewise, the Ministry of Health presented the Plan to introduce the COVID-19 vaccine in the GruS. In the education platform, it was possible to harmonize criteria to carry out a series of thematic webinars between various agencies. Additionally, a shared repository was organized with materials produced in response to the emergency.

SUMMARY ANALYSIS OF PROGRAMME RESPONSE

Risk Communication and Community Engagement (RCCE)

During quarantine, communication series were produced and disseminated through audiovisual pieces and artwork for social networks, many of which in native languages such as Quechua, Aymara and Guaraní. The main topics were the prevention of violence in the family, the mental health of adolescents, and the skills of parents and children to better deal with confinement. Innovations were made in the generation of evidence prior to the production of each series, consulting parents, adolescents and health operators through virtual focus groups, interviews and a review of reports from the "Safe Family" helpline. The positive masculinity approach was also kept in mind as a critical concept for involving men in the prevention of violence. The most outstanding series are Early Childhood Care during the Pandemic (radio), #MiCasaSinViolencia, #MeDiviertoEnCasa, #NoEstasSol @, Time to Play and Laugh. One important milestone was reaching two million people with the spot "My home without violence - Play, laugh and talk in the family!" through Facebook.

Another action under this component was the awareness-raising campaigns targeting local authorities, community leaders, parents and health personnel to restart vaccination subject to appropriate biosafety measures. Support was given to updating vaccination in four municipalities where the number of children who did not receive vaccinations had increased at an alarming rate.

⁴ "Protection of children and adolescents against the COVID-19 crisis", UNICEF, 2020.

During this reporting period, UNICEF consolidated the series of online webinars "UNICEF at Home" that are broadcast regularly on Saturdays. This channel for communication interaction proved to enjoy widespread acceptance. In this period, from August to October, 15 webinars were held, in which 127,749 people participated. The topics disseminated were youth leadership, science and technology for girls, alternative forms of education, healthy eating, and managing emotions during the quarantine. The aim of the webinars is for national, international experts and UNICEF staff to provide parents, caregivers, children and adolescents with truthful and useful information about the COVID-19 pandemic, the confinement and how to deal with this situation. In this period, the following webinars are highlighted: "Singing workshop for children and adolescents", "Managing emotions for workers in the first line of care", and "Take care of your emotions and take care of your family".

Another activity is the promotion of the voice of adolescents and young people through U-Report. In this reporting period, four surveys were conducted among adolescents and young people, in which 2,271 adolescents and young people expressed their views on topics related to the pandemic caused by COVID-19. We should underscore the participation of 942 young people and adolescents in the survey on the <a href="https://should.com/should-new should be shou

- "Has your diet changed during the quarantine?", July 2020.
- "How have these months living with COVID-19 been?", August 2020.
- "Youth Day: Adolescents and Youth vis-à-vis the Pandemic and Political Context", September 2020.
- "Well-being of adolescents and young people during the pandemic", September 2020.



Excerpt from the survey: How have these months living with COVID-19 been? August 2020.

Provision of critical medical and water, sanitation and hygiene (WASH) supplies and improving infection and prevention control (IPC)

From August to October, 18,150 people benefited from basic supplies and essential WASH services in the most vulnerable municipalities of the departments of Santa Cruz, Beni and Cochabamba, where, together with La Paz, the largest number of cases of COVID-19 concentrated. UNICEF also delivered supplies and PPE to the Water and Sanitation Service Providers, COSMOL, Sajuba and El Recreo in the municipalities of Montero and Santa Cruz. This delivery will help ensure the continuity of basic water and sanitation services for 135,000 people. In addition, 8,055 children under five years of age, mothers, fathers and caregivers who use the social childcare services in La Paz, El Alto and Cochabamba, benefited from essential hygiene supplies.

Furthermore, UNICEF delivered 51 water tanks for storage of 5,000 liters of drinking water. In coordination with the Ministry of Environment and Water, this delivery was prioritized to target 3,200 people in the municipalities of San Ramón, San Joaquín, San Ignacio de Moxos, Loreto and Minero in the departments of Beni and Santa Cruz.

Twenty-four mobile hand washing stations were delivered to the rural population of the municipality of Independencia in the department of Cochabamba. In coordination with the municipal government, the mobile facilities are located at the entrance of health facilities, markets, child centers and isolation centers, benefiting 3,320 people. When the schools are reopened, hand washing stations will be installed at the service of the student population.

Within the framework of the COVID-19 response plan for the Yuki, Yuracaré and Chiquitano indigenous populations, UNICEF distributed 46 mobile hand washing stations. These facilities will be located at the entrance of health facilities and community spaces where people gather in large numbers. This intervention will contribute to 1,800 indigenous people having access to hand washing facilities with soap and water for the prevention of contagion.

UNICEF also delivered essential hygiene supplies for 18 healthcare facilities and PPE for health workers serving the Yuki, Yuracaré, and Chiquitano indigenous communities. Additionally, 650 Chiquitano families from San Antonio de Lomerio and 710 Yukis, Yuracarés, and Moxeños from the tropics of Cochabamba received biosafety supplies such us alcohol gel, liquid soap, bleach, powdered detergent, and reusable protective masks. UNICEF prioritized its actions in these communities that are highly vulnerable due to the low population rate, high poverty rates, voluntary isolation and limited access to health services.

An important need during the pandemic in Bolivia has been the access to PPE for health personnel. During this reporting period, UNICEF provided PPE for 2,937 health officials to have biosafety inputs such as N95 face masks, safety goggles, suits and face shields. These supplies were delivered to 401 health workers in recovery (isolation) centers in the cities of Tarija, Sucre, Cobija, El Alto and Llallagua, which helped ensure continuity of the services provided in these isolation centers where PAHO/WHO is also developing training activities in the framework of a World Bank-financed interagency project. UNICEF also helped for 500 health workers in six maternity wards to receive PPE and biosafety inputs, which helped ensure the continuity of essential mother and childcare services.

With UNICEF support, 78 health centers of the Riberalta, Trinidad and San Borja health networks received biosafety supplies to ensure the continuity of primary healthcare services.

Continuity of healthcare and nutrition services for women and children

UNICEF contributes to the institutional strengthening of the health system to deal with the pandemic. During this period, training activities were started for health personnel on the detection, referral and proper management of COVID-19 cases. To date, 30 health workers in the department of Santa Cruz have received this training. In addition, UNICEF has supported the Ministry of Health by hiring 19 nursing assistants in eight mother and child hospitals that provide treatment and follow-up of COVID-19 cases in pregnant women.

UNICEF is also strengthening the epidemiological surveillance of COVID-19 in five Departmental Health Services (La Paz, Beni, Pando, Santa Cruz and Potosí). To this end, UNICEF finances the hiring of five statistical technicians who support the collection, consolidation and systematization of information on COVID-19, especially among pregnant women.

Having identified a decrease in immunization coverage and the delivery of micronutrients such as vitamin A, particularly in children under five years of age, the Expanded Immunization Program (EIP) and the National Nutrition Program decided to develop joint actions to reach children with vaccines and vitamin A. Vaccination campaigns were carried out in the country's nine departments, focusing on urban and peri-urban areas. UNICEF assisted the Ministry of Health to set up brigades and fixed vaccination posts. UNICEF provides financial and technical support to the EIP in drafting and implementation of the communication strategy.

In collaboration with implementing partner *Cáritas* Bolivia, 3,100 rations of the nutritional supplement "Nutribebé" for three months were delivered to 642 children between 6 and 24 months of age from the Yuki, Yuracaré, Chiquitano and Moxeño indigenous communities to prevent malnutrition, along with other activities aimed to promote comprehensive early childhood development.

Between August and October, 16,374 caregivers of children under two years of age, with the accumulated number being 73,874 caregivers since March, received information and training on breastfeeding and child nutrition. An interactive virtual event aimed at promoting health/eating/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for/to-september/for-

UNICEF supported the Ministry of Education, Sports and Culture by providing 450 copies of the "Ready to Play" Program. Produced by UNICEF and Sesame Street, the program promotes healthy habits among children of 8 to 9 years old in the context of the COVID-19 pandemic.

Continuation of education and access to child protection, gender-based violence prevention and social protection services

Concerning the Education response, UNICEF is supporting IRFA Radio Santa Cruz, a local radio station, to broadcast radio education for 6,157 children at primary school level in the regular education subsystem, in the municipalities of Guarayos, Urubicha, Charagua, and Iyambae in the department of Santa Cruz. These municipalities are characterized by many indigenous populations with no connectivity and no devices to access virtual education. The radio becomes a feasible alternative to reach the children of these communities with distance education.

In addition, UNICEF has supported the procurement of 1,118 reading and learning kits to support the primary school students in these communities with a set of six books aimed at bridging the literacy process in children. The kits also include learning material such as notebooks, colored pencils, a sharpener, an eraser, etc. Finally, UNICEF also supported the Ministry of Education, Sports and Culture with the procurement of 700 hygiene kits, which include a face mask, disinfectant, soap, paper



Promotion of the advanced module of teacher training in digital skills.

towels, and alcohol in gel. Distribution targeted students of the most affected schools. However, since the schools have been shut down, a revised distribution plan is underway.

In partnership with telecommunications company Tigo Millicom and in coordination with the Ministry of Education, UNICEF has contributed to the strengthening of digital skills of 7,991 teachers to provide distance education using computer tools. Through this action, 512,099 children and adolescents across the country continued their distance learning.

The continuity of **child and adolescent protection** services at the different levels of the State was seriously affected by the pandemic, mainly due to the lack of biosafety supplies for protection of workers and beneficiaries.

UNICEF Bolivia, along with other partners, promoted a series of online seminars to strengthen the institutional capacities of 2,061 employees of Child Protection and Social Welfare Services, including police officers, children's courts and prosecutor's offices, the health system, care homes, civil society organizations, and children and young people themselves. The topics addressed included emotional support to children, vulnerable populations and caregivers; protocols for care and prevention of COVID-19 infection; mental health in the family; and alternative care practices in the context of COVID-19. In this way, UNICEF contributes to supporting child protection services in 15 municipalities (in five departments: La Paz, Pando, Beni, Cochabamba and Santa Cruz) that serve 364,412 children and adolescents. Additionally, these municipalities also benefited from the distribution of biosafety supplies along with the departmental governments and two-line ministries.

Through different webinars and awareness-raising sessions, UNICEF reached 112,000 people with key messages on taking care of the mental health of children and adolescents and preventing violence at home.

Another significant result is the establishment of the "Safe Family" free helpline promoted by UNICEF, in collaboration with civil and governmental organizations. In 6.5 months of operation, the helpline has served more than 22,000 people; 8,140 of them were children and adolescents. This service provides information on the prevention of COVID-19 infection, psycho-emotional support services, and reports and refers cases of violence to the child protection system.

Likewise, UNICEF provided mental health and psychosocial support through its implementing partners. In this reporting period, 819 girls, 912 boys, 22 children with disabilities (a cumulative number of 5,666 children and adolescents since March) in temporary shelters, in a situation of vulnerability, and living with their mothers in prison have received psycho-emotional assistance, along with their caretakers and families.

UNICEF also distributed biosafety supplies to migrant children and adolescents and their families, and children and adolescents in street situations.

A total of 54,290 protective face masks have been purchased and distributed, in addition to nitrile gloves, glasses, face shields, shoe covers, caps, protective gowns, and backpack sprayers, cleaning and hygiene supplies (alcohol gel, bleach, liquid soap), and thermometers.

With regard to **social protection**, during this period UNICEF has provided monetary assistance through the cash transfer modality. Money was given to families with high levels of economic vulnerability and impacted by the pandemic. With the support of eight Civil Society Organizations, 369 families were identified as targets. The allowances were between BOB 400 (US\$ 57) and BOB 1,400 (US\$ 201), depending on the needs identified in each family. The allowances are intended to provide financial support for household needs related to food, hygiene and rent. UNICEF entered into an agreement with private bank "Bisa" for delivery of the money through the "mobile money transfer" mechanism. UNICEF has already provided a first round to 243 families, of whom 133 are Venezuelan migrants, 71 female-headed households and 12 families with persons with disabilities.

Monitoring and Evaluation (M&E)

Different pillars currently support our M&E actions: Programme Monitoring and Partner Reporting, Operations Monitoring through the VISION platform, Cluster Coordination Monitoring, and measuring the quality of the response.

We are working to include the voice of the beneficiaries regarding the quality of the humanitarian response to complete the vision of Results-Based Monitoring. An independent third party is carrying out this process. It will focus on strengthening successful activities as perceived by beneficiaries, identifying difficulties in

implementation, and compiling recommendations for redesigning and resolving challenges. Also, we are analyzing the results of the survey on the impact of COVID-19 on households in Bolivia, conducted in August under the leadership of the LAC Regional Office (LACRO) to strengthen the response plan.

Through the support of the M&E Interagency Group, co-led by UNICEF, a better interagency monitoring has been put in place within the framework of the COVID-19 Socioeconomic Response Plan in Bolivia, Recovery for the Future.

2020 Targets and Results

Risk Communication and Community Engagement (RCCE)

Target for Dec 2020



3,000,000

people reached on COVID-19 through messaging on prevention and access to services.

86% (Results by 21 October 2020) 2,575,451 Target for Dec 2020



25,000

people engaged on COVID-19 through RCCE actions.

77% (Results by 21 October 2020) 19,317 Target for Dec 2020



25,000

people sharing their concerns and asking questions/clarifications regarding available support services to address their needs through established feedback mechanisms.

91% (Results by 21 October 2020) 22,754

WASH/Infection Prevention Control (IPC)

Target for Dec 2020



42,864

people reached with critical WASH supplies (including hygiene items) and services.

62% (Results by 21 October 2020) 26,534 Target for Dec 2020



7,504

healthcare workers within health facilities and communities provided with Personal Protective Equipment (PPE).

> 84% (Results by 21 October 2020) 6,286

Continuity of healthcare for women and children

Target for Dec 2020

100

healthcare providers trained in detecting, referral and appropriate management of COVID-19 cases.

30%⁵ (Results by 21 October 2020) 30 Target for Dec 2020



caregivers of children (0-23 months) reached with messages on breastfeeding in the context of COVID-19.

87% (Results by 21 October 2020) 73,874

⁵ This indicator is progressing as expected since its implementation started in August

Access to continuous education, child protection and GBV services

Target for Dec 2020

Target for Dec 2020



Target for Dec 2020



1,440,000

children supported with distance/home-based learning.

42%⁶ (Results by 21 October 2020) 597,743 **50**

children without parental or family care provided with appropriate alternative care arrangements.

82% (Results by 21 October 2020) 450,700

children and adults that have access to a safe and accessible channel to report sexual exploitation and abuse.

> 81% (Results by 21 October 2020) 364,412

Target for Dec 2020



40,000

children, parents and primary caregivers provided with community-based mental health and psychosocial support.

27%' (Results by 22 July 2020) 10,675 Target for Dec 2020



200

UNICEF personnel & partners that have completed training on GBV risk mitigation & referrals for survivors, including for PSEA.

78% (Results by 22 July 2020) 155

FUNDING OVERVIEW AND PARTNERSHIPS

UNICEF Bolivia is part of the UNICEF COVID-19 Global Humanitarian Action for Children (HAC) appeal. The requirement of the Bolivia Office is US\$ 6,000,000 according to the planned actions. This budget is aimed at contributing to the strategic pillars of the HAC: i) strengthening risk communication and community participation, ii) infection prevention and control, iii) continuity of essential health services, and iv) continuation of education and access to child protection, gender-based violence prevention and social protection services.

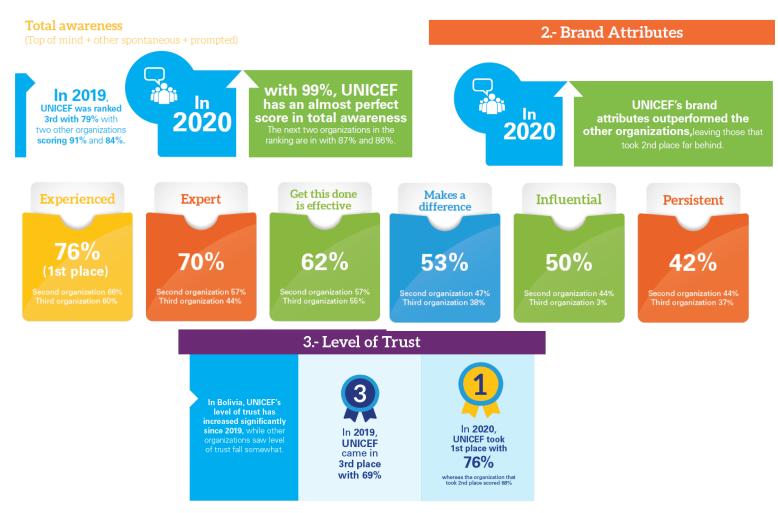
By the end of October, UNICEF Bolivia had received US\$ 3.1 million under the Global COVID-19 HAC appeal. USAID contributed with funds to prevent the spread of COVID-19 and ensure the continuity of maternal and childcare in 10 hospitals in the country; the World Bank (PEF) contributed - through a Joint Programme agreed between the National Government and the Agencies of the United Nations System - to support the isolation centers for mild positive patients. UNICEF also received generous contributions from DFID and Global Partnership for Education during the earliest stages of the pandemic and from the Sweden Embassy in Bolivia who made additional contributions for the COVID-19 emergency. Moreover, given the extent of the needs, UNICEF Bolivia reallocated US\$ 1.4 million from Country Programme funds for the COVID-19 response, negotiating allocated resources with donors. Despite the significant progress achieved up to date, the Country Office is facing financial gaps to continue increasing results in education and providing support to essential health services.

 $^{^{6}}$ This indicator has been progressing slower than expected, due to the unexpected early closure of the school year.

⁷ This indicator is progressing as expected. The next SitRep will report the increase.

Great results on the UNICEF Brand Barometer Study - Bolivia 2020

The UNICEF Brand Barometer is a multi-country brand and communication study conducted annually in 31 countries. The fieldwork of this study was carried out in September. The results in Bolivia demonstrate the relevance and effectiveness of UNICEF's Country Office humanitarian response to COVID-19, as well as the confidence and acceptance of our assistance in the future.



HUMAN INTEREST STORIES AND EXTERNAL MEDIA

Since the start of the pandemic, UNICEF Bolivia has published press articles to disseminate the COVID-19 response in the country:

- 1. Because of the COVID-19 pandemic, hand washing is a fundamental pillar of public health
- 2. 36,000 educators reactivate and reorient their capacities towards virtual education
- 3. 300 Bolivian adolescents started the training of TIGO and UNICEF to become Digital Citizens
- 4. 6,200 children from three indigenous territories in Santa Cruz will receive classes over the radio
- 5. The Swedish Embassy in Bolivia and UNICEF join efforts to respond to the COVID-19 pandemic in five municipalities
- 6. The Mercedes Health Center of the Senkata Network resumes vaccination services for children and adolescents
- 7. UNICEF and Tigo enter into an alliance for the education of Bolivians
- 8. The rhythm of the charango and twelve singers give life to the Bolivian version of ONE LOVE for UNICEF's global Reimagine campaign
- 9. Children can learn at home with affection and simple activities
- 10. Safe breastfeeding during the COVID-19 pandemic
- 11. Adolescents and young people disagree with the shutdown of the school year

UNICEF BOLIVIA ALSO PRODUCED AUDIOVISUAL MATERIALS

- 1. Ángeles, a girl who has no barriers to study, train and make friends
- 2. ONE LOVE UNICEF BOLIVIA with 19 artists
- 3. Vino Tinto, the right place for peaceful coexistence
- 4. Wash your hands to the rhythm of the duckling song
- 5. Hand washing with adolescents from Montero
- 6. Step-by-step hand washing with Luciana

Next SitRep: 31 January 2021

UNICEF Latin America and the Caribbean Regional Office: www.unicef.org/lac

UNICEF Bolivia Country Office: https://www.unicef.org/bolivia/

UNICEF Global Humanitarian Action for Children Appeal: https://www.unicef.org/appeals/covid-2019.html

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