



Emergency Response Plan: Zika Virus Pandemic

Status of Zika Virus in Brazil



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Impact overview:

- ✓ In 2015 1,669,669 probable cases of these infections were registered in the country
- ✓ In 2016, there were more 300,980 probable registered cases
 - ✓ This data includes infections caused by dengue fever, Chikungunya and Zika.
- ✓ The peak incidence of the infections occurs in the rainy season.
- ✓ According to the Brazilian government, Zika virus transmission was confirmed in the country from April 2015.

Concerns:

- ✓ Brazilian Health Secretariat is still performing studies to confirm a probable association between Zika virus and cases of fetuses with microcephaly, a neurological malformation.
- ✓ Due to the the increasing number of infected people reported, there is a growing demand for repellents, provoking higher prices. The same logic is noticed for mosquito nets around the country.

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Cases of Microcephaly:

By March 19, 2016 (Source: Health Ministry).

- ✓ Number of reported cases: 6,671
- ✓ Confirmed cases: 907
- ✓ Cases under investigation: 4,293
- ✓ Cases dropped: 1,471
- ✓ Deaths reported: 198 (The cases that progressed to stillbirth or neonatal)
- ✓ The Northeast region has the highest number of confirmed cases of microcephaly. Pernambuco is the state with the highest number of cases with 268 confirmations, followed by Bahia (170), Paraíba (91), Rio Grande do Norte (81), Ceará (68) and Piauí (52).

Sponsored or registered children affected:

- ✓ # affected by the mosquito: 114
- ✓ # suspected cases affected by the mosquito: 13
- ✓ # suspected cases of microcephaly: 2
- ✓ # cases with microcephaly: 10
- ✓ # cases of pregnant teens: 22

Where we are



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Action Plan
45 Days (Just finished)
6 Months (Expansion of
Activities)

Action Plan for 45 days



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Programming	Advocacy	Comunicação e Sustentabilidade
Objective: To develop educational actions towards the prevention of new <u>Zika</u> cases, especially for pregnant women and children.	Objective: Incidence so that the guidelines against <u>Zika</u> virus established by the Federal Government become effective at municipal level.	Objective: Dissemination of educational information and guidelines among professionals who provide assistance to the population.
45 days		
<ul style="list-style-type: none"> • Prioritization of urban contexts. • Identification of the areas of greatest risk in the project areas. • Conduct weekly task forces: Government campaign called Saturday's Cleaners to eliminate breeding sites. • Development of monitoring tools. • Delivery repellents and mosquito nets for pregnant women of the communities and to the employees of the team. 	<ul style="list-style-type: none"> • Articulation of actors from different sectors. • Training of the teams in the ADPs. • Hiring a local technical coordinator. • Conduct a quick diagnosis together with leaders: screening of pregnant women and adolescents, children with microcephaly. • Construction of a Local Action Plan • Search insertion in the State Committees. • Mobilization strategic Churches. 	<ul style="list-style-type: none"> • Weekly reports. • Video production. • Production of stories about <u>Zika</u> theme. • Dissemination of information through the social media. • Creation of graphic materials. • Radio spot. • Text messages with information of the means of preventing the diseases caused by the <u>Aedes Aegypti</u> mosquito.



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World Vision Emergency Response			
Reduce the prevalence of the disease to save lives while building community resilience.			
Contribute to the control and elimination of mosquito breeding places of Aedes Aegypti in areas of high prevalence in Honduras, Guatemala, El Salvador, Colombia, and Brazil			
Logical Framework Inputs		Outputs	
Objective	Outcome	Activity	Indicator
Intermediate result I		Intermediate result II	
Intermediate result III		Intermediate result IV	
Reduce the mosquito vector population to levels at which the transmission of the virus is reduced or prevented.		Increase public awareness of the disease Zika through education and community actions	
Expand surveillance and monitoring of the mosquito Aedes Aegypti, along with health authorities to record and report cases.		Support the protection of people at risk, especially pregnant women, through the use of pre-positioning equipment for protection measures against mosquito.	
Country capacity, improved to reduce the prevalence of breeding sites and virus-borne diseases.		Increased community understanding, acceptance and support of efforts to control the vectors through communicating health risks and prevention strategies.	
Support the response to the event, providing the tools and guidance for proper management of the response		Increased risk perception by individuals for behavioral change	
Activities		Activities	
Organize mass weekly WASH activities in the communities of the 18 priority POAs where there is high prevalence of mosquitoes in homes, schools, public areas and churches to prevent or minimize the spread of vector and human contact with the mosquito.		Use several means of communication channels (App / game, SMS) to disseminate information through media and straightly to the public on preventive measures.	
Build capacity in World Vision staff for the understanding of the disease and create an internal prevention campaign.		Dissemination through media and local networks the official protocols of prevention and patients care.	
Production of videos, stories, radio spots and educational materials.		Directing pregnant women and adolescents and children with microcephaly to specialized services.	
Mobilization of national and local churches, community groups, sectors of public services and coordination of community volunteers to committees (Fraternity Campaign and/or Channel of Hope)		Perform monitoring and home visits to pregnant women (especially cases of high-risk adolescents and pregnant women, children under 6 and disabled people) in coordination with health services.	
Carry out participatory rapid assessments for construction of local action plans with community committees.		Capacity building for Public Technical Staff on emotional support to pregnant women.	
Develop public actions with young people in the Olympics gaming areas.			
Campaign aimed at tourists and athletes at the airport and the bus station in Rio de Janeiro.			
Conduct public hearing with parliamentarians, in the city of Rio de Janeiro (Olympics).			
Work closely with the Health Ministry and other authorities to assess the situation, join forces and prepare public statements.			
Develop ongoing awareness activities in schools located in the areas of influence of ADOs in coordination with school authorities.			

Main Results



World Vision Brazil is present in 23 cities in 10 states, in the care and monitoring of 68,200 children. We are working in three (3) capitals: Fortaleza, Recife and Rio de Janeiro, targeting a population of 308,990 people.

Figures:

- 1) Number of beneficiaries: 25,420 families in communities and 200,000 people through prevention guidelines via SMS.
- 2) Repellents: 6,000 units for children, adolescents and pregnant women.
- 3) Mosquito nets to pregnant women: 1,500 units.
- 4) Identification material for teams: 350 vests, badges and caps.
- 5) Number of workshops: 22 for teams of 11 ADP. Broadly there were 275 people trained by the end of the action plan.
- 6) Number of workshops and WASH task forces: 27 for the teams.
- 7) Number of partner churches: 24.
- 8) Number of trained community committees: 01.
- 9) Number of mobilized public schools: 06.

Nexts Steps



With the increase of financial resources, in addition to the three aforementioned cities it will be included Salvador, São Paulo and Maceió, for the period from April to September. The actions will be carried out as follows:

1. Continuity of activities for prevention and raising awareness within communities.
2. Capacity building of primary care health teams of Recife for the realization of “psycho-social support for pregnant women and families with children with microcephaly and other complications resulting from zika virus”.
3. Implementation of Caixa do Saber (Knowledge Box) methodology for children, using technological means to promote health and prevent the mosquito and arboviruses.
4. Create an APP: a creative game aiming to mobilize health promotion and prevention Mosquito and arboviruses. The proposal is to bring about changes in individual behavior patterns and collective.
5. Support for Innovative Actions: recognizing the Community creative practices, World Vision reserve a resource to support innovative actions to combat mosquito.

Necessary Support



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What we have achieved	What we need
<p>Inputs for individual protection for a predetermined population (repellents, mosquito nets)</p> <p>Personal protective equipment and identification for the team and Volunteers</p> <p>Production of printed materials for dissemination of joint efforts and with the official protocols to combat the mosquito and personal care.</p> <p>Dissemination of activities in various broadcast media (radio, community bikes).</p> <p>Training of teams to work in schools and community associations, discussing the disease, ways of transmission and prevention measures.</p> <p>Implementation of a Knowledge Box (<u>Caixa do Saber</u>), containing technological equipment, library and intuitive software and appropriate child language (Fortaleza).</p>	<p>Increase in the number of inputs in proportion to the population we want to achieve.</p> <p>Acquisition of new items that support protection measures such as sealing screens of water tanks, thermometers for delivery kits for pregnant women and children under 6 years, screens for sealing windows.</p> <p>Creating an APP to support the disclosures especially among young people.</p> <p>Expansion of Knowledge Box (<u>Caixa do Saber</u>) to other locations.</p> <p>Reproduction of promotional materials, print and external media.</p>

Photos



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