



ZIKA RESPONSE MULTI-PARTNER TRUST FUND

CONCEPT NOTE

Programme Title: *El Salvador Zika Virus (ZKV) Response Plan – Joint Intervention UNFPA, UNAIDS, UNICEF*

Support national capacities to control the spread of ZIKV and mitigate the impact on the most vulnerable groups:

Objective(s) of Programme

- 1. Enhance national capacities on health, education and civil protection to provide care, support and promote engagement actions focused on the most vulnerable families and communities, with emphasis on children, youth and women, to surveillance and early detection, personal protection, education and prevention of sexual transmission diseases including ZKV, HIV.*
 - 2. Support a comprehensive and coherent response from the WASH sector in communities and with families, promoting the reduction of breeding sites, the appropriate waste management and healthy behaviors.*
 - 3. Strengthen the National Protection System for Children and Adolescents capacity to implement mechanisms at local level to prevent and opportunely address sexual violence and assure access to sexual and reproductive health services.*
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Geographic Area

Actions are targeted at two levels:

- National level, strengthening protection mechanisms and*
 - At local level, focused in most at-risk municipalities from six departments with the highest rates of ZIKV and teen pregnancy incidence (Chalatenango, Cabañas, Cuscatlán, San Vicente, San Salvador and La Libertad)*
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Implementing Entities

- National partners, members of the National Subcommittee on Water, Sanitation and Hygiene in El Salvador, specifically PROVIDA and ASPRODE*
- National Government institutions: Health and Education Ministries, Salvadoran Institute for Children and Adolescent's Development (ISNA), National HIV Program, Women's Institute (ISDEMU), National Council on Children and Adolescents (CONNA) .*
- UNAIDS, UNFPA and UNICEF (Joint Team)*

Additional coordination already in place will be strengthened, particularly UNETT and the UNS Group on ZIVK and international agencies such Plan International, Save the Children and World Vision.

Timeframe

8-12 months

Epidemiological

- Since the beginning of the outbreak, official figures reports an*
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ZIKA RESPONSE MULTI-PARTNER TRUST FUND

CONCEPT NOTE

context *accumulated of 10,532 suspected cases.*

- *By June 11, there are 231 suspected cases in pregnant women, 80% of them live in the 6 most in risk departments, where a total of 10,816 pregnant women are registered by Ministry of Health.*
- *In June 14, Ministry of Health reported the first microcephaly born baby directly linked to ZIKV. However, microcephaly cases reach 59 by the end of May, a figure higher than those registered in previous years.*
- *Up to July 2016, UNICEF has reached near 30,000 children, adolescents, young people and women with key messages in 14 municipalities with the highest incidence rate.*
- *663 people in 21 communities have participated in cleaning days to control mosquito breedings.*

SRP Objective *This Response Plan is aligned and contributes to Strategic Objective to build the capacity of local and national authorities to develop and through a Joint intervention from 3 agencies of the UNS, implementing a multi-sectoral response strategy, consolidating current actions and increasing the scope to integrate protection, care and support to affected children, adolescents, young and women.*

Beneficiaries *Direct beneficiaries : 30,000 Families
Indirect beneficiaries: 50,000 Families.*

- *Children between 0-9 years: 15,000*
- *Adolescents between 10-19 years: 20,000*
- *Pregnant women: 6,000, including 1,800 pregnant adolescents.*

Women in reproductive age : 30,000

Government counterparts *Ministry of Health and its National HIV Program, Ministry of Education, National Council on Children and Adolescents (CONNA), Salvadoran Institute for Children and Adolescent (ISNA), National Direction of Civil Protection and Disasters Preparedness and Response (DGPC), Women's Institute (ISDEMU), Municipalities (including the Salvadoran Municipalities Corporation)*

Description of Programme Components and Key Output(s)

<i>Detection and prevention</i>

- a. *Promotion, scale up and institutionalization of community base surveillance mechanism focusing on destroy and eliminate breeding sites / vector density and protection of most the most vulnerable groups: children, adolescents, young and women in reproductive age, including pregnant women. (UNFPA, UNICEF, UNAIDS) .*
- b. *Dissemination of information and awareness raising campaign, including gender approach and sensitization through peer education strategies targeting children, adolescent, young and women in reproductive age and adolescents. This should include a comprehensive*



ZIKA RESPONSE MULTI-PARTNER TRUST FUND

CONCEPT NOTE

reproductive health education directed to Woman with HIV, including gender approach. (UNFPA, UNICEF, UNAIDS)

- c. Implementation of Ministry of Education comprehensive sexuality education curricula among teachers, childhood and adolescence, and families. (UNFPA)*

Care and Support:

- a. Awareness raising on existing reporting mechanisms and promotion of their use to report violations of sexual and reproductive rights as well as gender-based violence. (UNFPA, UNICEF)*
- b. Strengthen the capacity of local capacities (Municipal Governments and communities) to address violations of sexual and reproductive health and opportunely provide access to health services, through friendly health services for adolescents (UNFPA, UNICEF, UNAIDS)*
- c. Enhancement of mechanism for active search of pregnant women for prenatal check-ups, including quality attention in accordance with official guidelines, and provision of protection supplies to prevent ZIKV transmission.(UNFPA, UNICEF)*
- d. Strengthen local capacities of health services to prevent ZKV transmission, with emphasis in guarantying access to contraceptive methods, counselling, diagnosis and appropriate family planning and treatment of STI, HIV. (UNFPA)*

Coordinated response

- a. Enhance the leader role of the National Sub commission on Water and Sanitation to support a coherent multisector response, improving targeting and optimizing impact. (UNFPA, UNICEF, UNAIDS)*
- b. Generate inter-sectoral coordination bodies at the local level to assure the diagnosis and appropriate surveillance with emphasis in most vulnerable groups, removing access barriers to sexual and reproductive health services. (UNFPA)*

Communication

- a. Sustained campaign on social networks and media with key messages for behaviours change, targeted to most vulnerable population, especially children, adolescents, young, women in reproductive age and pregnant women. (UNFPA, UNICEF, UNAIDS)*
- b. Dissemination of information at community and national level about personal protective behaviors, identification of symptoms, care seeking information, prevention of sexual transmission, as well as prevention and protection against gender-based violence. (UNFPA)*

Outputs

- Increase resilience and sustain capacity of population to control ZIKV outbreak, ensuring the effectiveness of the response.*
 - Strengthen knowledge among adolescents, young and women about transmission modes of ZIKV.*
 - Reduce ZIKV transmission rate and minimize the risk of ZIKV-related microcephaly and other neurological disorders among the most vulnerable communities.*
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ZIKA RESPONSE MULTI-PARTNER TRUST FUND

CONCEPT NOTE

Project budget by UN categories

ZIKA RESPONSE MPTF - PROJECT BUDGET				
CATEGORIES	Amount UNICEF EI Salvador CO	Amount UNAIDS EI Salvador CO	Amount UNFPA EI Salvador CO	Total
1. Staff and other personnel Interagency coordinator / education specialist / administrative assistant	\$ 7,500.00	\$50,000.00		\$57,500.00
2. Supplies, Commodities, Materials (medical supplies, contraceptives)	\$ -	38,000.00	\$250,000.00	\$288,000.00
3. Equipment, Vehicles, and Furniture, incl. Depreciation	\$ -	\$ -	\$ --	\$ --
4. Contractual services (include details) - Communication Assistant (US\$2000 / 12 months) - Social Protection Local support (lump sum US\$11,500) Awareness campaign / Logistic support to Ministries /Printing	\$ 45,500.00	\$ 92,500.00	\$165,000.00	\$303,000.00
5. Travel (include details)	\$ -	\$ -	\$ -	\$ -
6. Transfers and Grants to Counterparts - PROVIDA \$ 70,000: Supplies & Services (\$50,000) Staff(\$8,420) Transport (7,000) Operational Costs (\$4580)/ Vector control, community surveillance - ASPRODE \$ 48,150.00: : Supplies & Services (\$25,000) Staff(\$15,000) Transport (\$5,000) Operational Costs (\$3,150)/ Vector control, community surveillance -National HIV Program \$ 48,150: Supplies & Services (\$25,000) Staff(\$15,000) Transport (\$5,000) Operational Costs (\$3,150)/Transmission Prevention ICW capitulo El Salvador \$50,000.00: Supplies & Services (\$30,000) Staff(\$8,000) Transport (7,000) Operational Costs (\$5000)/ Support to women in reproductive age. Asociación Vision \$ 50,000.00: Supplies & Services (\$30,000) Staff(\$8,000) Transport (7,000) Operational Costs (\$5000)/ Support to women in reproductive age.	\$166,300.00	\$100,000.00	\$ -	\$266,300.00
7. General Operating and other Direct Costs	\$11,280.50	\$ 10,100.00	\$15,708.00	\$37,088.50
Sub-Total Project Costs	\$172,430.50	\$290,600.00	\$430,708.00	\$893,738.50
8. Indirect Support Costs*	\$12,070.14	\$19,446.00	\$34,456.64	\$65,972.78
TOTAL	\$184,500.64	\$310,046.00	\$465,164.64	\$1,911,599.78

* The rate shall not exceed 7% of the total of categories 1-7, as specified in the Ebola Response MOU and should follow the rules and guidelines of each recipient organization. Note that Agency-incurred direct project implementation costs should be charged to the relevant budget line, according to the Agency's regulations, rules and procedures.