

# DREF Operation

## Nicaragua: Dengue Outbreak

<b>DREF Operation:</b> MDRNI009	<b>GLIDE n°:</b> <a href="#">EP-2019-000090-NIC</a>
<b>Date of issue:</b> 14 August 2019	<b>Expected timeframe:</b> 3 months
<b>Operation start date:</b> 14 August 2019	<b>Operation end date:</b> 14 November 2019
<b>Category allocated to the disaster or crisis:</b> <b>Orange</b>	<b>DREF allocated:</b> 286,712 Swiss francs (CHF)
<b>N° of people to be affected:</b> 55,289 cases suspicious of dengue confirmed.	<b>Number of people to be assisted:</b> 41,750 people
<b>Host National Society:</b> The Nicaraguan Red Cross has 32 branches (17 at the municipal level) and 2,000 volunteers distributed across the country	
<b>Red Cross Red Crescent Movement partners actively involved in the operation:</b> International Federation of the Red Cross and Red Crescent Societies (IFRC)	
<b>Other organizations involved:</b> Ministry of Health (MINSAs), Ministry of Education (MINED), communities in Masaya, Chinandega and Managua Departments; Pan American Health Organization (PAHO).	

<Click [here](#) for the DREF budget, [here](#) for the map of affected areas and [here](#) for the contact information >

## A. Situation analysis

### Description of the disaster

On 31 July 2019, the Ministry of Health declared an Epidemiological Alert to control the mosquito that transmits dengue, chikungunya and zika. There are 55,289 cases suspicious of dengue officially confirmed. This alert situation must be handled carefully, responsibly, as 2,232 confirmed cases of dengue have been reported this year. There is a significant increase of 271% of confirmed cases comparing the data from 2018 and 2019.

According to the most recent report issued by the Pan American Health Organization (PAHO) for the period between 1 January and 22 June 2019, Nicaragua is the country with the second highest incidence of dengue cases in Latin America, preceded by Brazil and followed by Colombia and Honduras. The incidence rate in Nicaragua is 441 per 100,000 inhabitants; however, it is the country that reports the lowest lethality rate, i.e. fewer deaths from dengue.

The following table shows the dengue virus' spread in July 2019, per week and per department. As can be seen, Managua, Chinandega and Masaya are first, second and fourth in total case load, respectively. It also shows a 145 per cent increase in the first two departments - more than twice that reported in the rest of the country in comparison with the number of cases from weeks 19-24 and the number of cases from weeks 25-30.

According to the latest data from PAHO, Nicaragua has the highest incidence rate in the Americas:

Country	Incidence rate (cases per 100,000)	Number of cases	Proportion of severe dengue (%)	Case-fatality rate (%)	Serotypes reported
Nicaragua	736.47	55,289	0.69	0.01	2
Brazil	645.58	1,345,994	0.07	0.04	1,2,3,4
Honduras	462.39	42,346	23.13	0.19	1,2
Belize	169.37	647	0	0.00	N/A
Colombia	267.1	71,736	1.1	0.05	1,2,3
El Salvador	160.89	10,316	0.23	0.03	2
Paraguay	120.69	8,324	N/A	0.11	1,2,4
Guatemala	68.3	12,081	0.45	0.32	1,2,3,4
Mexico	30.41	39,770	1.18	0.05	1,2,3,4
Venezuela	18.48	5,983	0.52	0.13	1,2,3

Table 1. Epidemiological Update - Dengue. 9 August 2019. Source: PAHO.

### Dengue cases confirmed by MINSA in the last 12 weeks<sup>1</sup>

SILAIS	SEMANAS												ULTIMAS 12 SEMANAS		% Dif.	
	19	20	21	22	23	24	25	26	27	28	29	30	SE 19-24	SE 25-30		
Managua	10	11	5	10	15	20	15	33	58	39	84	39	71	268	277%	
Chinandega	6	6	5	5	13	23	31	45	21	24	74		58	195	236%	
Leon	12	14	12	11	14	28	29	37	29	46	39	2	91	182	100%	
Masaya	9	6	5	2	1	5	5	5	5	13	19	30	28	77	175%	
Carazo		4	4	4	2	5	7	12	8	4	18	4	19	53	179%	
Jinotega	10	16	7	21	12	8	6	13	11	5	10		74	45	-39%	
Esteli	4	6	4	6	2	6	5	7	10	3	12	3	28	40	43%	
R. A. Atlantico Sur			5		4	2	6	6	6	5	12		11	35	218%	
Matagalpa		12	1	3	8	1	2	16	2	11			25	31	24%	
Rio San Juan				3	1		4	7	18	1			4	30	650%	
Granada		1	3	1	1	4	4	2	3	3	7	6	10	25	150%	
Nueva Segovia		1				2	3	1	2	5	6	1	3	18	500%	
Rivas		1					1	4	2	5	4		1	16	1500%	
Chontales					1		1	2	1	4	5	2	1	15	1400%	
Las Minas					2		1	1	1	3	6		2	12	500%	
Madriz				1	2	5	4	2		4			8	10	25%	
Boaco						1	2	1		1	2		1	6	500%	
Zelaya Central						1	2						1	2	100%	
<b>Total PAIS</b>	<b>51</b>	<b>78</b>	<b>51</b>	<b>64</b>	<b>80</b>	<b>11</b>	<b>2</b>	<b>124</b>	<b>191</b>	<b>166</b>	<b>3</b>	<b>299</b>	<b>87</b>	<b>436</b>	<b>1060</b>	<b>143%</b>

Table 2. Epidemiological Week no.30 (21 to 27 de July 2019). Source: MINSA

The latest report issued by the Ministry of Health (July 19) registers eight deaths from dengue in Nicaragua. Of all arbovirus diseases present in countries and territories in the Americas, dengue is the most frequent and has the greatest negative impact in public health.

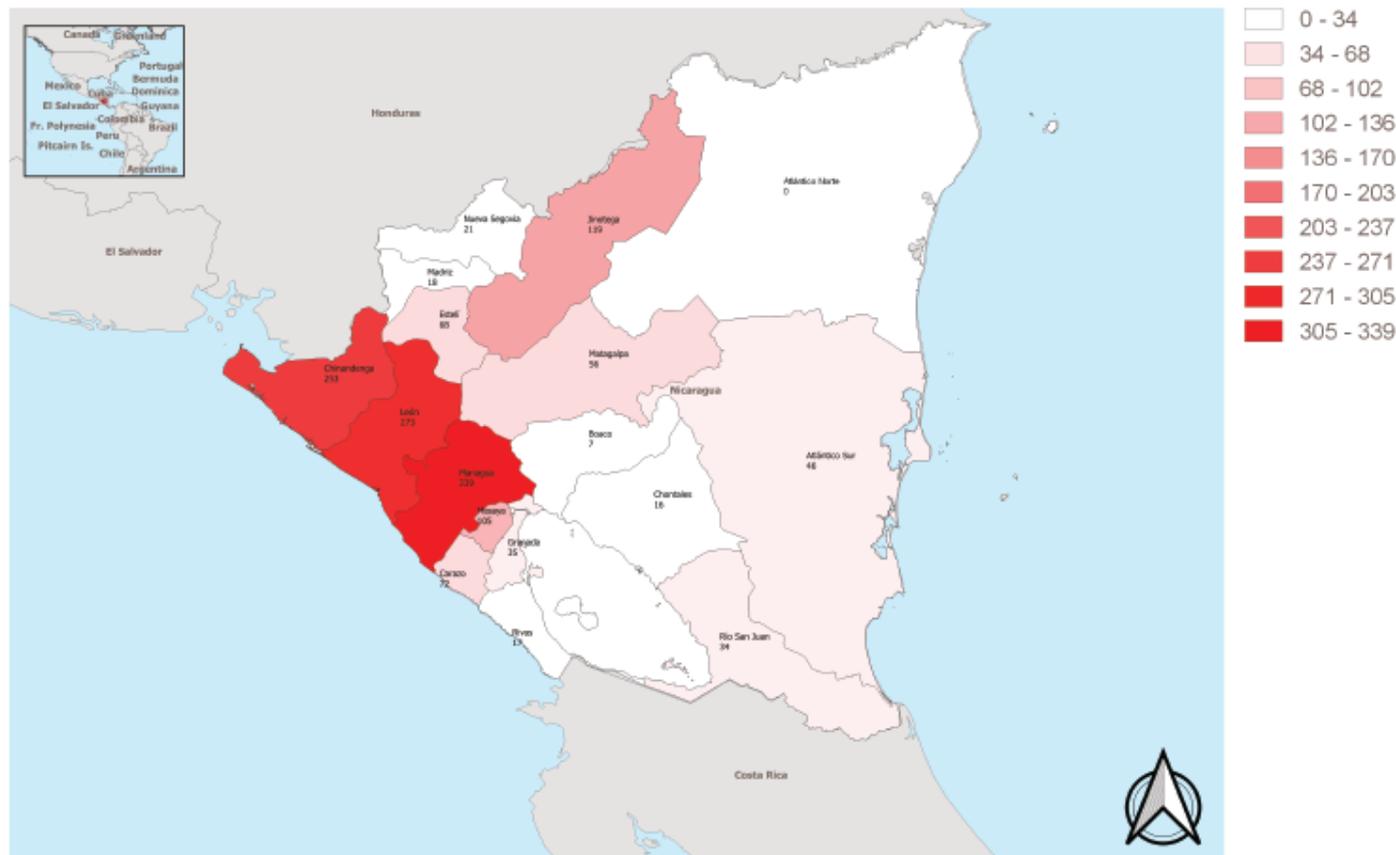
<sup>1</sup> SILAIS: Sistemas Locales de Atención Integral en Salud (Local Comprehensive Health Care Systems)

The disease is caused by four different strains of the dengue virus, meaning one individual might contract dengue four times throughout his or her life, with an increased risk of life-threatening dengue haemorrhagic fever or dengue shock syndrome after the first infection.

**See map of the affected departments:**



**NICARAGUA: DENGUE OUTBREAK - CASES IN THE LAST 12 WEEKS BY DEPARTMENT**  
**8-AUGUST-2019 - Glide n° EP-2019-000090-NIC**



The maps used do not imply the expression of any opinion on the part of the International Federation of the Red Cross and Red Crescent Societies or National Societies concerning the legal status of a territory or of its authorities.  
 Map data sources: Nicaraguan Red Cross, Nicaraguan Government, GADM, Natural Earth - Produced by IM Americas.

On 31 July 2019, the Ministry of Health declared an Epidemiological Alert to control the mosquito that transmits dengue, chikungunya and zika.

As presented in the table below, 55,289 dengue suspected cases have been reported of which 2,232 have been confirmed this year, which requires strengthening prevention and care through all epidemic control actions that the Ministry of Health will be publishing during the epidemiological alert aimed at more effectively fighting the mosquito that transmits dengue, chikungunya and zika in the country.

PATOLOGIAS	ACUMULADO HASTA SE 30				OBSERVACIÓN
	CASOS		TASA		
	2018	2019	2018	2019	
Dengue Sospechoso	22986	55289	35.58	84.70	Se observa un aumento del <b>138%</b> con respecto al año anterior.
Dengue Confirmado	595	2232	0.92	3.42	Se observa un aumento del <b>271%</b> con respecto al año anterior.

Table 3. MINSA Epidemiological Week no.30 (21 to 27 de July 2019). Source: MINSA

According to MINSA's Surveillance Department, the number of suspected cases increased 138 per cent and the number of cases confirmed represents 271 per cent more than in 2018.

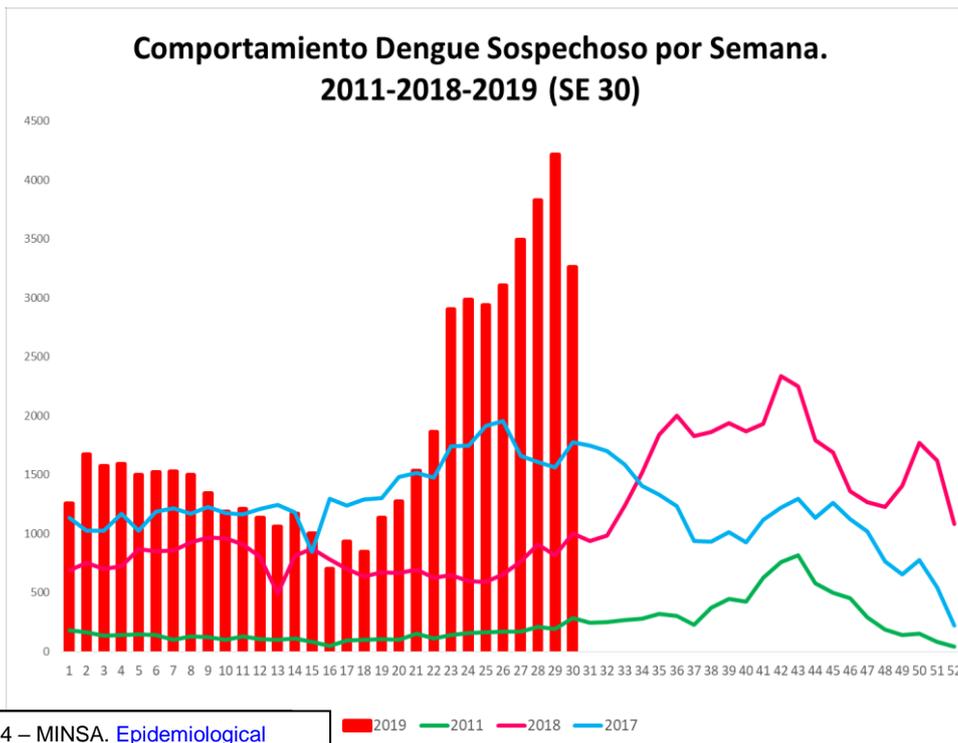


Table 4 – MINSA. [Epidemiological Week no.30 \(21 to 27 de July 2019\)](#)

The chart above shows the increase in cases over the last eight years, 2019 being the year with the greatest increase in the first 30 weeks of the year. This chart can be compared with Table 1, which shows a significant increase week over week.

## Summary of response

### Overview of Host National Society

The Nicaraguan Red Cross was founded 85 years ago and operates in Nicaragua as an auxiliary to public authorities according to the legal framework. It is composed of 32 branches (17 at the municipal level) and 2,000 volunteers distributed across the country.

NRC strategic guidelines include actions aimed at helping the most vulnerable populations to strengthen their levels of resilience through delivery of health-focused services, programmes and projects, while at the same time strengthening the country network's capacity for response in terms of health-related prevention and interventions. Health is understood as the balance between the population's emotional, physical, psychological and social context and their interaction with the environment in which they live. NRC has previously worked on this health aspect by promoting changes in behaviour in communities through the adoption of healthy practices in their homes to reduce the spread of dengue, chikungunya and zika.

The Community-Based Action Project against zika implemented from September 2016 to August 2019 is an example in this regard. This project, funded by IFRC in conjunction with Save The Children, aims to strengthen NRC volunteers' capacity in vector control, community-based first aid, community-based surveillance, community psychosocial support circles (with a cross-cutting disabilities axis), as well as to strongly emphasize the role of community mobilization. Led by 66 National Society volunteers, this project was implemented in five departments: Rivas, Masaya, Chinandega, Somoto and Granada. In the last three years, it has carried out zika prevention actions and enriched its work through volunteers trained in the matter, who, therefore, constitute available capacities. It has also prepared educational and awareness materials to inform the population about prevention and self-protection measures.

Thanks to this project the NRC has capacities in place when it comes to human resources, volunteers and community outreach, and has included community engagement and accountability, which was a best practice, as a new approach in outbreaks' interventions and the actions focused in schools.

A network of volunteers has been created at the national level, who are trained in health issues and possess methodologies to address the issue at the community level. The learning and experience processes have been carried out in collaboration with teachers, community leaders, religious leaders and parents, trained with new elements that have been incorporated into their daily lives to improve family and social relationships.

NRC addresses health issues through methodologies that have been adapted to our context and implemented and validated with students and community members, thus generating opportunities for analysis, reflection and trust to make proposals that contribute to influencing changes in the population's behaviour. It is worth mentioning that NRC implemented a Dengue DREF in 2013, supplemented with funding from Spanish Agency for International Development Cooperation (AECID) and Spanish Red Cross.

The DREF operation of Dengue response in 2013/2014 ([MDRNI005](#)) generated positive results that helped strengthen this intervention. Thanks to this experience, strategic alliances were established with schools, government entities, and institutes for the confirmation of community brigades. Also, integrating a gender perspective during the intervention, making household vector control generated a joint responsibility in households for preventing dengue.

Given MINSA's priorities, efforts should focus on empowering families to carry out vector control actions in their homes and community, as well as on influencing behavioural changes to reduce the spread of the virus. Three departments - Managua, Masaya and Chinandega - will be targeted<sup>2</sup> because of their high incidence rates, population density and poverty levels; greater presence of breeding sites related to drinking water infrastructure, such as lack of storm drainage and sewerage services; and especially because of the high number of confirmed cases: 268 cases in Managua, 195 in Chinandega and 77 cases in Masaya.

### **Overview of Red Cross Red Crescent Movement in country**

IFRC currently does not have a presence in the country but is financing a Preparedness for Effective Response project. At this time, NRC is coordinating actions and possible mechanisms to respond to the alert declared in the country. Italian Red Cross and Spanish Red Cross do have a presence in the country and help to implement strategic actions through technical and financial support. Italian Red Cross focuses on building institutional capacity in resource mobilization, risk management and psychosocial support, whereas Spanish Red Cross' support is centred on building the National Society's capacity in risk management, livelihoods and psychosocial support (PSS).

The International Committee of the Red Cross (ICRC) is also present in the country, providing technical advice on specific issues such as Safer Access and Restoring Family Links. Synergy with the Government and its Ministries has been maintained and strengthened, mainly the Ministry for the National Disaster Prevention, Mitigation and Relief System, through participation in its sectoral commissions. Coordination is also maintained with the Ministry of Health and Ministry of the Interior and attached institutions.

Some National Society branches, such as those in Chinandega, Rivas, Masaya, Jinotega, Sébaco and León, are investing considerable efforts in activities to identify breeding sites, awareness talks, and communications and information on warning signs for early detection, as most deaths are attributed to victims' failure to seek timely medical assistance.

In terms of lessons learnt from previous the previous DREF for Dengue the following actions will be promoted;

- Effective coordination among committee members and volunteers leads to better organized, streamlined intervention processes.
- Maintaining good communication between headquarters and branches ensures timely and effective institutional response.
- Promoting inter-agency agreements contributes to recognition and to support in managing Red Cross funding and cooperation in emergency situations.

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<sup>2</sup> Leon department is not included as one of the targeted departments as it is already covered through other actors and there has been a substantial decrease in cases in Leon, in week 30 with only two cases.

- Teamwork and political will of authorities in branches allows actions to develop in a smooth and timely manner.
- Integrating the entire staff into the work allowed conducting the intervention according to schedule.
- Selecting volunteers according to their training profiles ensures better performance during interventions.



Photo 1: NRC volunteers supporting the prevention campaign – Source Nicaraguan Red Cross 2019.

### Overview of non-RCRC actors in country

After the nationwide Epidemiological Alert was declared, senior NRC management, including the National Council President and the Director General, met with the Minister of Health and her technical team to jointly agree on and establish support actions:

1. Activation of Monitoring Centre and Situation Room at the national level
2. Working session with MINSA Central's epidemiology team, who outlined national-level needs and the actions being coordinated with the Pan American Health Organization (PAHO).
3. Preparation of Global Plan by the management team (General Directorate, Project Management and Planning, Health Liaison Technical Unit, and Project CAZ Training, Finance and Coordination Department).
4. Coordination with external Movement partners to present the Global Plan, activate the humanitarian network and find potential sources of financing to implement it.
5. Branches are carrying out breeding site identification, vector control, and sanitation and hygiene promotion activities, which are coordinated by departmental sectoral working groups through which municipalities request branches' assistance in coordinating actions in the territory.
6. Coordination with Local Comprehensive Health Care Systems (SILAIS), which are the departmental and municipal liaisons through which actions with ESAFC and the Municipality are defined, and which also monitor municipal actions.

Actions conducted by Municipal and Departmental SILAIS focus on vector control through fumigation with and use of BTI (*Bacillus Thuringiensis Isarelensis*), a highly effective larvicide (biological control) recently used by the Ministry of Health after it stopped using Abate. They have agreed to review and adjust campaign materials and strategy in conjunction with PAHO, and to disseminate key messages such as that families need to realize that they are the main agents in generating change and reducing the spread of the virus by keeping their homes clean and controlling it themselves. Another important aspect is to stress that those most vulnerable, currently are children between the ages of 2 and 14 and that, once infected, the way to save their lives lies in early detection and seeking immediate care at the medical centre.

International non-governmental organizations' interventions could have to adjust their intervention based on the security situation that should be taken into account in order to ensure that the intervention is implemented in a safe way.

## Needs analysis and scenario planning

### Needs analysis

So far, Nicaragua has the highest incidence rate in the Region of the Americas; however, mortality rates are low (eights confirmed deaths in 2019) compared to other countries that do not report suspected cases but have high mortality rates.<sup>3</sup>

The main concern is that there could be an increase in the number of confirmed cases and not be able to address them in time, which is why the intervention has targeted the departments prioritized by MINSA: Managua, Masaya and Chinandega urban area. The characteristics that make these locations vulnerable include a lack of potable water, lack of storm drainage, lack of sewerage, poverty, homes located near water flows, among other aspects. The clearly defined lines will be health in emergencies as well as communications campaigns through the deployment of volunteers intervening directly in communities. As for elements and tools, the ones already prepared in previous years will be adjusted, revising key messages and emphasizing that dengue is the most important.

Dengue fever is typically a self-limiting disease with a mortality rate of less than 1%, however the outbreak is characterized with high level of mortality in Central America, the Psychosocial support forms an important part of a sustainable response in this scenario<sup>4</sup>. The main focuses of the intervention are PSS for women of childbearing age, pregnant women, pregnant women with parvovirus; support for volunteers and staff in PSS, Community sessions to reduce stigma and discrimination.<sup>5</sup>

### Targeting

Red Cross activities are expected to benefit at least 8,350 families living in at-risk areas, as well as schools, teachers and students - a total of approximately 41,750 people. The beneficiary selection and targeting are based on the vulnerability of the communities that have been selected. These communities face challenges such a lack of support from other entities and high impact of the dengue outbreak.

Beneficiaries per Target Group:<sup>6</sup>

ACTIVIDADES GENERALES	BENEFICIARIOS	MANAGUA				MASAYA				CHINANDEGA				TOTAL
		BARRIO N° 1	BARRIO N° 2	BARRIO N° 3	BARRIO N° 4	B° VILLA HOLANDA	B° SACUANJOCHE	B° ARENAL	B° MAGDALENA	B° PEDRO JOAQUIN CHAMORRO	B° WALTER ARATA	B° BELLO AMANECER	B° BAYARDO ARCE	
Formaciones Educativas	Lideres Comunitarios	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	8.00	96.00
	Escuelas Niños, Niñas, Adolescentes	1,300.00	750.00	400.00	600.00	350.00	400.00	800.00		1,372.00	2,458.00		754.00	9,184.00
	Maestros	3.00	3.00	3.00	3.00	3.00	3.00	3.00		3.00	3.00		3.00	30.00
	Epidemiologos	3.00	3.00	3.00	3.00	2.00	2.00	2.00	2.00	3.00	3.00	2.00	2.00	30.00
	ESAFC	3.00	3.00	3.00	2.00	2.00	2.00	3.00	2.00	3.00	3.00	2.00	2.00	30.00
Movilizacion Comunitaria (Visitas Domiciliares)	Viviendas	550.00	800.00	450.00	600.00	350.00	350.00	332.00	450.00	1,230.00	1,838.00	600.00	800.00	8,350.00
	Personas	1,433.00	3,233.00	1,833.00	2,384.00	1,385.00	1,335.00	844.00	2,238.00	4,761.00	6,715.00	2,988.00	3,231.00	32,380.00
<b>TOTAL</b>		<b>2,750.00</b>	<b>4,000.00</b>	<b>2,250.00</b>	<b>3,000.00</b>	<b>1,750.00</b>	<b>1,750.00</b>	<b>1,660.00</b>	<b>2,250.00</b>	<b>6,150.00</b>	<b>9,190.00</b>	<b>3,000.00</b>	<b>4,000.00</b>	<b>41,750.00</b>

<sup>3</sup> Pan-American Health Organization PAHO. [Epidemiological Update - Dengue. 9 August 2019.](#)

<sup>4</sup> [https://www.paho.org/disasters/index.php?option=com\\_docman&view=download&category\\_slug=mental-health&alias=2542-mental-health-protection-psycho-social-support-epidemic-settings-2016-542&Itemid=1179&lang=en](https://www.paho.org/disasters/index.php?option=com_docman&view=download&category_slug=mental-health&alias=2542-mental-health-protection-psycho-social-support-epidemic-settings-2016-542&Itemid=1179&lang=en)

<sup>5</sup> [https://reliefweb.int/sites/reliefweb.int/files/resources/2016-PS-Centre-Annual-Report\\_web.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/2016-PS-Centre-Annual-Report_web.pdf)

<sup>6</sup> There was a typo in the chart. The text in the second column and fourth row should spell "Escuelas: Niños, Niñas, Adolescentes."

## Operation Risk Assessment

Nicaragua Red Cross operations are based on the Humanitarian Principles and safer access methodology. Thanks to this approach, NRC has a good reputation in country and minimise potential risk related to political situation in country.

NRC will ensure that all security measures are taken to keep volunteers safe by implementing the security plan. The initial plan will be analysed, and actions adjusted to other implementation mechanisms, working with mainstream groups to support continuity in the field and further strengthening the communications campaign in order to make it easier to deliver information to the population. In order to avoid affecting coordination and partnerships established with Ministries, agencies and the general public, NRC will always act in accordance with the Seven Fundamental Principles, especially neutrality and impartiality, and strengthening its auxiliary role.

## B. Operational strategy

### Proposed strategy

The proposed strategy for timely follow-up will be to maintain previously established coordination with the health system, from the central to departmental levels where the intervention will be carried out. This will ensure access to official data and reports that allow continuous monitoring and evaluation that in turn enables effective identification of needs. One of the strengths of the health system is that it keeps an updated population census disaggregated by gender, diversity, disability and age group, which ensures comprehensive actions.

An agreement letter reinforcing the commitments assumed by the parties (Minister of Health and Nicaraguan RC) could be signed to ensure continued involvement by national and local government actors. Community assemblies will be held with the population to receive feedback, assess plan of action results, empower them, and make decisions that help mitigate any potential impact on the project's life cycle. This generates an accountability best practice for affected populations.

### Overall objective:

To provide services to families in order to reduce incidence of dengue, zika and chikungunya on at-risk vulnerable populations through communications measures centred on changing behaviours, education and vector control activities.

### Specific objective:

- ✓ To strengthen community and individual capacity to counteract the impact from dengue, zika and chikungunya through community empowerment and mobilization related to vector control.
- ✓ To promote key changes in behaviour through information campaigns on dengue, zika and chikungunya, as well as promote care services and support for families affected by these arboviruses.
- ✓ To encourage the community to actively participate in vector control and epidemiological surveillance measures in the community.

## Intervention components:

### Target population

NICARAGUA									
Departamento	Municipio	Comunidades	N° de Familias	Población	Centros Educativos	Estudiantes	Voluntarios CRN	ESAFIC MINSA	EPIDEMIOLOGOS MINSA
Chinandega (133,361)	Chinandega	Pedro Joaquin Ch	1,230	6,150	Escuela 1	1,372	10	4	3
		Walter Arata	1,838	9,190	Escuela 2	2,458			3
		Bello Amanecer	600	3,000					
		Bayardo Arce	800	4,000	Escuela 3	754			3
Managua	Distrito III	Barrio 1	550	2,750	Escuela 1	1,300	15	4	3
		Barrio 2	800	4,000	Escuela 2	750			3
	Distrito V	Barrio 1	450	2,250	Escuela 1	400		3	3
		Barrio 2	600	3,000	Escuela 2	600			3
Masaya (173,874)	Masaya	Bo. Villa Holanda	350	1,750	Escuela 1	350	10	4	3
		Bo. Sacuanjoche	350	1,750	Escuela 2	400			3
		Bo. El Arenal	332	1,660	Escuela 3	800			3
		Magdalena	450	2,250					
<b>TOTAL</b>			<b>8,350</b>	<b>41,750</b>	<b>10</b>	<b>9,184</b>	<b>35</b>	<b>15</b>	<b>30</b>

Intervention actions will be carried out with support from volunteers with different specialties: National Intervention Teams (NITs), Health in Emergencies and Epidemic Control, Community-Based Health and First Aid (CBHFA), Water and Sanitation, and the Participatory Hygiene and Sanitation Transformation (PHAST) methodology. Educational materials (flip charts and posters) will be used to disseminate information.

### Operational support services

Nicaraguan Red Cross' National Headquarters is composed of one General Directorate, three other directorates, and offices. Operational actions are carried out through 32 branches across the country, with support from volunteers. Each section assumes a function when the National Society responds to a disaster:

- The **General Directorate** provides support and guidance to decision making that benefits the National Society and uses Humanitarian Diplomacy to obtain secondary information from government institutions and international organizations present in the country.
- The **Risk Reduction and Health in Emergencies** Department will be responsible for overseeing the DREF's implementation, specifically under a vector control approach. It will provide guidance for monitoring and effective implementation, maintain close communication with high-level Ministry of Public Health authorities and participate in national coordination tables.
- The **Financial-Administrative** Department comprises Accounting, Warehouse, Procurement and Transport, Human Resources and Administration; therefore, this department will provide support to administrative processes involving purchases, hiring, funds requests and liquidation, warehousing, transport and logistics. These processes will be carried out per NRC's and IFRC's Internal Control Manual.
- **National Training Department** is responsible for keeping track of courses, workshops and talks conducted at the National Society level.
- The **Audit Department** will ensure transparency in expenditures and adequate accountability
- The **Communications Department** provides support in the preparation of key messages, audio-visual documentation of the operation and dissemination of achievements related to operation start-up and implements its actions through the communication networks of the 32 branches nationwide.

- **Nicaraguan Red Cross branches:** proposed areas fall under the geographic scope of such branches, which have the necessary capacity and resources to implement the proposal and identify with the community

### Human Resources:

Given the expected coverage of the intervention, the following will be hired:

- **One Project Coordinator**, who will have knowledge and experience in vector control, monitoring and evaluation, reporting and project management and, ideally, trained in the International Red Cross Movement
- **One field technician**, who will be responsible for activities at the local level and experienced in community organizing, training and inter-institutional coordination
- **One Administrator**, who will be responsible for funds requests, liquidation, logistics and purchasing processes
- **One driver:** field activities and administrative support
- Volunteers involved in the operation:
  - Volunteers to be trained in Vector Control: 35
  - Volunteers involved in house visits: 35 volunteers trained, 96 community leaders, 15 ESAFC, 30 epidemiologists, 24 ZIKA volunteers (8 Masaya, 8 Chinandega, 8 Managua). Total: 200
  - Breeding sites elimination sessions: 35 volunteers trained, 96 community leaders, 15 ESAFC, 30 epidemiologists, 50 School brigade volunteers 24 ZIKA volunteers (8 Masaya, 8 Chinandega, 8 Managua). Total: 250:
  - School Brigades Sessions: 3 volunteers per school in Managua (4 schools x 3 volunteers: 12 volunteers), 2 volunteers per school in Masaya y Chinandega (6 schools x 2 volunteers: 12 volunteers). Total 24 volunteers.
  - Awareness sessions on information, early detection and prevention of Dengue.
  - Media Communication visits: 12 visits x 3 volunteers per visit. Total 36 volunteers.

### Logistics and supply chain

- **Purchasing plans:** purchases will be made in accordance with Nicaraguan Red Cross Internal Control Manual. Three quotes are required for all purchases valued at U\$1,000.00 or more, which are approved based on a quality and cost analysis. Items are then delivered and checked for required quality, after which a check is issued to the supplier.
- **Warehousing:** Nicaraguan Red Cross National Headquarters' warehouse will be used in accordance with National Society norms established in this regard.
- **Transport needs:** Only if required. Personnel will be transported exclusively in Nicaraguan Red Cross vehicles, which will be in compliance with National Society norms regarding use of the emblem, security, Safer Access standards and NRC's vehicle use manual.

### Information Technology (IT)

There is a radio communications system that can be used if needed by teams in the field. In addition, technicians and volunteers will be provided airtime for cell phone calls.

### Communications

Project staff together with the Communications and Press Department will design the mass media communications campaign (radio and television) on dengue control, recognizing warning signs, and respective care for this disease.

Based on Nicaraguan Red Cross' Code of Conduct, security regulations and Safer Access, all information, publicity and advertising activities shall recognize beneficiaries as dignified human beings and not objects of pity, highlighting their skills.

### Security

In view of the latest political events in the country, the project's technical team will draw up a Security Plan, in coordination with branch authorities, to ensure volunteers' and management team's physical integrity. This plan will be

based on the eight Safer Access Pillars and will include elements such as reporting any incident in targeted areas to the Emergency Operation Centre (EOC), dissemination, use of the emblem, schedules, and coordination with other institutions and with community leaders.

### **Planning, monitoring, evaluation and reporting (PMER)**

Planning, monitoring, evaluation and reporting will be carried out in accordance with IFRC's Programme and Project Planning guidelines and in close coordination with NRC's Monitoring and Evaluation Unit.

1. Actions will be monitored through registration instruments and indicators set by the Ministry of Health and NRC. Periodic meetings between the management team, project staff, branch councils and volunteers will be promoted in order to analyse the level of fulfilment of outcomes proposed by the project, identify gaps and propose improvement activities.
2. Official data regarding entomological indices and dengue incidence obtained by health services will be used to assess the project's impact. In addition, a beneficiary and health service staff satisfaction survey will be carried out during CEA community meetings. This information will be vitally important for the National Society to improve the quality of its actions in future interventions involving vector control.

### **Administration and Finance**

In addition to the Operational Team that will be hired to execute DREF Funds, support will be provided by National Headquarters staff:

1. Human Resources: Responsible for interviewing and hiring operational staff that will be executing funds, drawing up contracts and payroll.
2. Financial-Administrative Department: Responsible for ensuring logistical, financial and banking issues necessary for project implementation.
3. Accounting: Opening project bank accounts, issuing checks, reviewing payrolls, accountability of executed funds.
4. Transport: Drivers to transport operational staff to execute funds in various communities.
5. Procurement: Quotes for project purchases.
6. Warehouse: Safeguarding project purchases.

## C. Detailed Operational Plan



### Health

**People targeted: 41,750**

Male: 18,787

Female: 22,963

**Requirements (CHF) 174,936**

**Needs analysis:** Following the declaration of an epidemiological alert status by the Nicaraguan government, coordination was carried out with authorities of the Ministry of Health to identify the most affected departments which according to epidemiological surveillance have been Managua, Chinandega and Masaya, identifying as more urgent needs the elimination of breeding sites, larvae and the vector in their adult stage, so it requires a campaign to raise public awareness with a participatory family and community approach, on knowledge, detection of early signs and disease symptoms.

In addition, consultations were held with the branches of the affected Departments, which were coordinated with the Departmental Delegations of the Local Systems of Integral Health Care (SILAIS) who provided information on local needs: Training for Volunteers, community members and SILAIS members on Vector Control, management of BTI, equipment for identification, protection and elimination of hatcheries and information to the community about early detection of Dengue signs and symptoms and how to eliminate vector.

Dengue fever is typically a self-limiting disease with a mortality rate of less than 1%, however the outbreak is characterized with high level of mortality in Central America. Psychosocial support forms an important part of a sustainable response in this scenario<sup>7</sup>. The main focuses of the intervention are PSS for women of childbearing age, pregnant women, pregnant women with parvovirus; support for volunteers and staff in PSS, Community sessions to reduce stigma and discrimination.<sup>8</sup>

### HEALTH IN EMERGENCY TRAININGS

In clear fulfilment of NRC's auxiliary role in reducing suspected and confirmed cases of dengue, the proposed strategy will implement actions in coordination with MINSA delegates and directors, Ministry of Education delegates, school directors and students, community leaders, City Halls and the National Society's network of branches and volunteers in Chinandega, Masaya and Managua.

**Health Outcome 1:** Households in Masaya, Chinandega and Managua have increased knowledge regarding the risk posed by the dengue, zika and chikungunya viruses, through information on, awareness and implementation of mosquito breeding site elimination measures; prevention; and early detection of complications.

### Vector control and BTI management course:

<sup>7</sup>[https://www.paho.org/disasters/index.php?option=com\\_docman&view=download&category\\_slug=mental-health&alias=2542-mental-health-protection-psychosocial-support-epidemic-settings-2016-542&Itemid=1179&lang=en](https://www.paho.org/disasters/index.php?option=com_docman&view=download&category_slug=mental-health&alias=2542-mental-health-protection-psychosocial-support-epidemic-settings-2016-542&Itemid=1179&lang=en)

<sup>8</sup> [https://reliefweb.int/sites/reliefweb.int/files/resources/2016-PS-Centre-Annual-Report\\_web.pdf](https://reliefweb.int/sites/reliefweb.int/files/resources/2016-PS-Centre-Annual-Report_web.pdf)

35 NRC volunteers and 30 MINSA officials will be trained in vector control and use of BTI (*Bacillus Thuringiensis Israelensis*) employed for biological control during the larval stage of certain mosquitoes. Training will be provided by NRC and MINSA instructors.

#### **Training on how to identify warning signs of dengue:**

Following recommendation from PAHO, Red Cross personal working in ambulances services will be trained on how to identify warning signs of dengue.<sup>9</sup>

#### **Awareness talks to school brigades:**

NRC volunteers will deliver awareness talks on vector control and early detection of warning signs in three schools in Masaya, three in Chinandega and four in Managua, training 20 students to form brigades, for a total of 200 students who will be supporting vector control actions from their schools.

#### **School brigade sessions with students:**

School brigades from ten schools in Chinandega, Managua and Masaya will replicate what they learned in talks on vector control and early detection of warning signs, delivering one session to 20 students per school.

One 20-student brigade will be organized in each of the ten schools, i.e. a total of 200 students. Each school's brigade will guide breeding site identification actions, conduct risk mapping and vector surveillance, as well as deliver awareness talks during communications fairs in their schools, with high teacher involvement. Brigades and schools will be provided with an identification of breeding sites kit that includes: flashlight, magnifying glass, measuring tape, pickaxe, pipette, bags and container.

#### **Psychosocial support network in community sessions:**

The NRC has within its institutional policy, the inclusion of psychological support (PSS) in all its interventions, and also to the National Policy of Comprehensive Risk Management (by its acronym in Spanish PNGIR). The alert issued by MINSA was focused on the current Dengue situation but considering that other arbovirolosis diseases such as Zika and Chikungunya also transmitted by the mosquito *aedes aegyptis* and could produce effects on the congenital syndrome in pregnant women infected and that it is necessary to attend and prevent.

The PSS network of the NRC will provide psychosocial support sessions in communities and schools - five in Chinandega, five in Managua and five in Masaya - in order to help families and communities to cope with the stressful situations they are facing due to the proliferation of dengue cases affecting the community.

Aiming to:

Improve the approach taken by health personnel by notifying families that the Dengue virus infects your relative.

- Offer Psychological First Aid to the person who suffered the disease of Dengue, and that thinks he can get infected again.
- Work with the grief experienced by families who are seeing their relatives affected by this disease.
- Reduce the stigma suffered by people infected by Dengue, which they see as a danger within their community or their neighbourhood.

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<sup>9</sup>[https://www.paho.org/hq/index.php?option=com\\_docman&view=download&category\\_slug=dengue-2217&alias=49619-9-august-2019-dengue-epidemiological-update-1&Itemid=270&lang=en](https://www.paho.org/hq/index.php?option=com_docman&view=download&category_slug=dengue-2217&alias=49619-9-august-2019-dengue-epidemiological-update-1&Itemid=270&lang=en)

## COMMUNITY PLANNING AND IMPLEMENTATION OF VECTOR CONTROL ACTIVITIES

At the community level, participatory methodologies will be used to implement vector control activities to prevent dengue, zika and chikungunya. The first step will be to draw up a community plan to implement vector control actions, including risk maps to identify risks which in turn will be used to eliminate breeding sites through application of BTI. Two types of kits will be used to identify breeding sites and two other types to eliminate them.

## INFORMATION, AWARENESS AND COMMUNICATIONS CAMPAIGNS

Promote an information campaign based on Nicaraguan Red Cross' communications strategy - which includes communications tools such as radio ads, ads in cinemas, billboards, *mopis*, text messaging, visits to media outlets and community and school fairs - resuming key messages and educational and information material to disseminate prevention and protection messages through the network of NRC and community communicators. Communication kits will be distributed to the community communicators that includes: shirt, cap, bag, brochures, posters and flip charts.

### Communications materials and tools

SUPPORT MATERIALS		
SUPPORT	FUNCTION	GROUP
Sides of buses	Communicates key message on dengue	Bus routes in the metropolitan area
Mupis <sup>10</sup>	Communicates key message on dengue	Key locations in the metropolitan area.
Billboards	Communicates key message on dengue	Key locations in the metropolitan area.
Text messages	Communicates key message on dengue	General public
TV spots	Communicates key message on dengue	General public
Ads in cinemas	Communicates key message on dengue	General public
Radio spots	Communicates key message on dengue	General public
Flip chart	Communicates key message on dengue	General public
Banner	Communicates key message on dengue	General public
Brochures	Communicates key message on dengue	General public
Flyers	Communicates key message on dengue	General public
Posters	Communicates key message on dengue	General public

### Selection criteria:

- Departments with higher rates of confirmed and suspected dengue cases.

<sup>10</sup> It is a type of outdoor poster usually found on the street beside a bus stop.

- Departmental branches with greater capacity for voluntary resources.
- Request of the Health System to intervene in that area.

All branches involved are already doing some of their activities with their own resources in which they have been involved with the community leaders and the families of the affected communities according to the epidemiological surveillance reports that they report to us from the subsidiaries and that have been reported in community meetings and assemblies by the delegations of the Ministry of Health.

**Operation standards/benchmarks:** In the preparation of the Plan, reference is made to Standard 2.1.4 of the Sphere manual, which aims to achieve timely and effective development through preparation and response plans, but above all with coordination with all sectors to apply control specific measures following the standards promoted by the Minister of Health.

P&B Output Code	<b>Health Outcome 1: The immediate risks to the health of affected populations are reduced</b>	<p><i># of families and people reached through information on dengue signs and symptoms and/or prevention measures.</i>  <i>Families: 8,350</i>  <i>People: 41,570</i></p> <p><i># of communities that report dengue incidence reduction in the municipalities of Managua, Chinandega and Masaya.</i>  <i>Communities: 12 (4 Managua, 4 Masaya, 4 Chinandega)</i></p>											
	<b>Health Output 1.1:</b> Red Cross Personnel involved with Emergency Care receive continuous training process in health and vector control, BTI management and psychosocial support.	<p><i># of volunteers trained in Vector Control and BTI management</i>  <i>Target: 35</i></p> <p><i># of PSS Sessions for families emotionally affected by the virus</i>  <i>Target: 15</i></p> <p><i># of updated Silais Epidemiologists in Vector Control and BTI management</i>  <i>Target: 60</i></p>											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP021	Two vector control and BTI management courses												
AP023	15 PSS intervention sessions												
AP021	Workshop for NRC staff on how to identify warning signs of dengue												
P&B Output Code	<b>Health Output 1.2:</b> Students and teachers have information regarding prevention and early detection of complications from the vector-borne disease in targeted departments	<p><i># of schools trained in the preventive detention of dengue virus signs</i>  <i>Target: 10</i></p> <p><i># of schools involved in breeding site identification and elimination actions</i>  <i>Target: 10</i></p>											

		<p># of students trained on prevention measures for dengue reduction Target: 9,184</p> <p># of cleaning sessions in schools<sup>11</sup> Target: 10</p> <p># of teachers trained on dengue prevention measures Target: 30 teachers and 200 school leaders</p>											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP021	Sessions to raise awareness on vector control and early detection of warning signs (teachers and school leaders)												
AP021	Sessions of school brigades in Vector Control for each educational centre Community vector control (20 Refreshments * 10 Sessions)												
AP021	Identification of breeding sites in each educational centre. (10 schools * 2 Days)												
AP021	Risk Maps for the Elaboration of a Vector Control School Intervention Plan and implementation of intervention plan (cleaning of the breeding sites).												
<b>P&amp;B Output Code</b>	<b>Health Output 1.3:</b> Communities have information regarding prevention and early detection of complications from the vector-borne disease in targeted departments.	<p># of communities that know about integrated vector management, BTI and sanitation. Target: 12</p> <p># ESAFC<sup>12</sup> trained about integrated vector management, BTI and sanitation. Target: 15</p> <p># of community leaders who know about integrated vector management, BTI and sanitation. Target: 96</p>											
		Activities planned Week	1	2	3	4	5	6	7	8	9	10	11
AP021	Sessions on integrated vector management, BTI, sanitation and prevention of vector-borne diseases at community level												
AP021	Promote informational talks on prevention and early detection of dengue, zika and chikungunya.												
AP021	Risk Maps for the Elaboration of a Vector Control at community level Intervention Plan.												

<sup>11</sup> This entails awareness, identification of breeding sites and removing them.

<sup>12</sup> Family and Community Health and its Basic Health Teams (ESAFc)

P&B Output Code	<p><b>Health Output 1.4:</b> Improved the capacities of vulnerable populations through the information, awareness and communication campaign on the prevention and elimination of mosquito breeding sites and virus reduction by Dengue, Zika and Chikungunya for the promotion of key elements of behaviour changes related to protection of child support staff and their families</p>	<p># of people informed through communications campaign Target: 1,507,325</p> <p># of communications plan to sensitize and inform families about dengue, zika and chikungunya Target: 1</p> <p># of campaigns (including awareness tools and) to implement dengue, zika and chikungunya prevention awareness Target:10</p>											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP021	Prepare a Communications Plan												
AP021	Design awareness tools and campaigns												
AP021	Mass media Communications campaign (dissemination of messages and reproduction of educational material)												
AP021	Promote Community Health Sessions												
AP021	Visit media outlets to inform the population about protection measures and actions to eradicate the dengue, zika and chikungunya virus.												
AP021	Equip communicator network kit to promote sensibilization key messages												
P&B Output Code	<p><b>Health Outcome 2: Families, communities and schools in the municipalities of Managua, Chinandega and Masaya have controlled breeding sites and reduced mosquito populations through vector control actions, community-based surveillance in affected families.</b></p>	<p># of communities that have controlled mosquito breeding sites Target:12</p> <p># of community leaders empowered through dengue prevention and sanitation measures Target: 96</p> <p># of Identification of breeding sites kits distributed Target: 300</p> <p># of households reached by the fumigation campaigns and home visits Target: 500</p>											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP021	Create twelve (12) risk maps to prepare community intervention plan for vector control												

AP021	Carry out home visits to raise awareness on and prevent dengue, zika and chikungunya and identify warning signs for early referral to treatment												
AP021	Conduct surveillance actions to register positive breeding site for referral and counter-referral to SILAIS												
AP021	Identify mosquito-breeding grounds												
AP021	Breeding site elimination sessions for BTI application, in coordination with community leaders, ESAFC and MINSA.												
AP021	Fumigation Campaigns (15 Thermal fog Spray Pumps)												
AP021	80 Protection kit for volunteers supporting the fumigation campaigns												



## Water, sanitation and hygiene

**People Targeted: 41,750**

Male: 18,787

Female: 22,963

**Requirements (CHF) 31,935**

**Needs analysis:** Following the declaration of an epidemiological alert status by the Nicaraguan government, coordination was carried out with authorities of the Ministry of Health to identify the most affected departments which according to epidemiological surveillance have been Managua, Chinandega, León and Masaya, identifying as more urgent needs the elimination of breeding sites, larvae and the vector in their adult stage, so it requires a campaign to raise public awareness with a participatory family and community approach, on knowledge, detection of early signs and disease symptoms.

Consultations were held with the branches of the affected Departments, which were coordinated with the Departmental Delegations of the Local Systems of Integral Health Care (SILAIS) who provided information on local needs: Training for Volunteers, community members and SILAIS members on Vector Control, management of BTI, equipment for identification, protection and elimination of hatcheries and information to the community about early detection of Dengue signs and symptoms and how to eliminate vector.

### COMMUNITY PLANNING AND IMPLEMENTATION OF SANITATION AND HYGIENE PROMOTION ACTIVITIES AT THE COMMUNITY AND SCHOOL LEVEL

NRC will coordinate with neighbourhood or community leaders to conduct visits, as well as with Family and Community Health (ESAF) members in each centre to achieve comprehensive sessions. The aim is to provide information on zika, dengue and chikungunya and on protection and prevention measures. Each household will be visited at least three times in order to promote changes in behaviour regarding the vector, accompanied by cleaning days in communities. A Sanitation and Hygiene Promotion kit will be delivered to be used in the cleaning campaigns, that include: bleach, rake, a shovel, a broom, liquid soap and globes.

**Population to be assisted:** The departments of Managua, Chinandega and Masaya were selected, corresponding to the Departments with the highest number of confirmed cases of dengue and the higher potential to spread the dengue outbreak due the high the population density. The are other Departments that are covered by other organizations. The selection criteria has been defined in close coordination with the Minister of Health.

**Selection criteria:**

- Departments with higher rates of affectation with to positive cases and suspicious cases.
- Departmental branches with greater capacity for voluntary resources.
- Request of the Health System to intervene in that area.

All branches involved are already doing some of their activities with their own resources in which they have been involved with the community leaders and the families of the affected communities according to the epidemiological surveillance reports that they report to us from the subsidiaries and that have been reported in community meetings and assemblies by the delegations of the Ministry of Health.

**Operation standards/benchmarks:** In the preparation of the Plan, reference is made to Standard 1.1 of the Sphere manual, which aims to make the target population aware of the main health risks related to sanitation of hygiene by adopting individual, family and community measures to reduce them. In the same the standard 4.1 where the actions are aimed at reducing the spread of vector diseases in certain areas is also considered.

<b>P&amp;B Output Code</b>	<b>Outcome 3 de WASH: Families and communities have reduced breeding sites and reduced mosquito populations through sanitation and hygiene promotion in the Masaya, Chinandega and Managua communities.</b>	<i># department reached through sanitation and hygiene promotion. Target: 3</i>											
	<b>WASH Output 4.1: Families and communities are supported to perform cleaning actions for breeding sites eradication.</b>	<i># of cleaning campaigns carried out by the community for the eradication of breeding sites Target: 4</i>											
		<i># of sanitation and hygiene promotion kits used by the community Target: 500</i>											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP030	Carry out a sanitation and hygiene promotion action plan												
AP030	Community cleaning campaigns for the eradication of breeding sites in the affected municipalities												
AP030	Purchase and delivery of 500 kits for sanitation and hygiene promotion (chlorine, rake, shovel, broom, liquid soap, gloves)												

## Strategies for Implementation

Requirements (CHF) 62,342

<b>S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical and financial foundations, systems and structures, competences and capacities to plan and perform.</b>													
P&B Output Code	Output S1.1.6: National Societies have the necessary corporate infrastructure and systems in place	<i># of volunteers equipped with visibility and protection material Target: 90</i>											
		<i># of staff hired and leading the operation: Target: 4</i>											
	Activities planned Week	1	2	3	4	5	6	7	8	9	10	11	12
AP042	Visibility and protection equipment for volunteers												
AP042	CEA Community Sessions												
AP042	CEA Workshop Accountability to Communities and Schools												
AP042	Hiring of personnel supporting the operation for 3 months (one coordinator, one technician, one admin/financial officer and one driver)												
AP042	Monitoring visits												
AP042	Lesson learnt workshop												
<b>Outcome S2.1: Effective and coordinated international disaster response is ensured</b>													
P&B Output Code	Output S2.1.1: Effective response preparedness and NS surge capacity mechanism is maintained												
		Activities planned Week	1	2	3	4	5	6	7	8	9	10	11
AP046	Conduct monitoring missions												
AP046	Deploy a Regional Intervention Team (1 member)												

## D. Budget

See detailed budget [here](#).

## Contact Information

For further information, specifically related to this operation please contact:

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## How we work

All IFRC assistance seeks to adhere to the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief and the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable. The IFRC's vision is to inspire, **encourage, facilitate and promote at all times all forms of humanitarian activities** by National Societies, with a view to **preventing and alleviating human suffering**, and thereby contributing to the maintenance and promotion of human dignity and peace in the world.

The IFRC's work is guided by Strategy 2020 which puts forward three strategic aims:



**Save lives,**  
protect livelihoods,  
and strengthen recovery  
from disaster and crises.



Enable **healthy**  
and **safe** living.



Promote **social inclusion**  
and a culture of  
**non-violence** and **peace**.

# DREF OPERATION

05/08/2019

DREF #: MDRNI009

DREF NAME: Nicaragua Dengue Outbreak

Output code	Name in financial system (TBC)	Multilateral Response	Budget CHF
			0
AP005	Shelter assistance to households	-	0
AP006	Shelter tech. support and awareness	-	0
	<b>Total Shelter</b>	<b>-</b>	<b>0</b>
			0
AP007	Improvement of income sources	-	0
AP008	Livelihoods assistance	-	0
AP009	Food production & income generation	-	0
AP081	Multipurpose cash grants	-	0
AP010	Livelihoods awareness	-	0
	<b>Total Livelihoods &amp; basic needs</b>	<b>-</b>	<b>0</b>
			0
AP011	Health services to communities	-	0
AP012	Voluntary blood donation	-	0
AP013	Maternal newborn and child health	-	0
AP014	Nutrition	-	0
AP015	Road safety	-	0
AP016	NS capacity for health care	-	0
AP017	HIV and AIDS	-	0
AP018	Avian and human influenza pandemic	-	0
AP019	Malaria	-	0
AP020	Tuberculosis	-	0
AP021	Other infectious diseases	168,057.50	168,057
AP022	Health in emergency	-	0
AP023	Psychosocial support	6,878.34	6,878
AP024	Immunization activities	-	0
AP025	Health needs in complex settings	-	0
AP075	HIV/AIDS care and treatment	-	0
AP076	Malaria care and treatment	-	0
AP077	Tuberculosis care and treatment	-	0
AP078	RMNCH care and treatment	-	0
AP079	NCD care and treatment	-	0
AP080	Psychosocial support	-	0
AP082	Search and rescue	-	0
	<b>Total Health</b>	<b>174,935.84</b>	<b>174,936</b>
			0
AP026	Access to safe water	-	0
AP027	Treatment/reuse of wastewater	-	0
AP028	Reduction of open defecation	-	0
AP029	WASH knowledge and best practice	-	0
AP030	Hygiene promotion	31,935.15	31,935
	<b>Total WASH</b>	<b>31,935.15</b>	<b>31,935</b>
			0
AP031	Equitable access to services	-	0
AP032	Social inclusion-equitable status	-	0
AP033	Interpersonal violence prev/response	-	0
AP034	Response to SGBV in emergencies	-	0
AP035	NVP-education and advocacy programs	-	0
	<b>Total Protection, Gender and Inclusior</b>	<b>-</b>	<b>0</b>
			0
AP036	Migration assistance and protection	-	0
AP037	Migration awareness and advocacy	-	0
	<b>Total Migration</b>	<b>-</b>	<b>0</b>

AP001	Preparedness at community level	-	0
AP002	Response and risk red. at NS level	-	0
AP003	Green solutions	-	0
AP004	Climate change awareness	-	0
	<b>Total Disaster Risk Reduction</b>	<b>-</b>	<b>0</b>
			0
AP039	NS organisational capacity assessm.	-	0
AP040	NS volunteering deveelopment	2,505.68	2,506
AP042	NS corporate /organisational systems	39,398.15	39,398
	<b>Total Strenthening National Societies</b>	<b>41,903.83</b>	<b>41,904</b>
			0
AP046	IFRC surge capacity	20,438.50	20,438
AP047	Humanitarian principles and Rules	-	0
AP048	Integrated services for NS	-	0
AP049	IFRC coord. in humanitarian system	-	0
AP050	Supply chain and fleet services	-	0
AP051	Movement coordination	-	0
AP052	Movement shared services	-	0
	<b>Total Influence others as leading strat</b>	<b>20,438.50</b>	<b>20,438</b>
			0
AP053	Advocacy on humanitarian issues	-	0
AP054	IFRC policies and positions	-	0
AP055	Research and evaluation	-	0
AP056	Advocacy on humanitarian issues	-	0
AP057	Support to NS in policy & advocacy	-	0
AP058	Planning and reporting	-	0
AP059	Resource generation	-	0
AP060	Emergency fundraising excellence	-	0
AP061	NS resource and partnership dev.supp	-	0
AP064	Financial management	-	0
AP065	Administration	-	0
AP066	Staff security	-	0
	<b>Total Influence others as leading strat</b>	<b>-</b>	<b>0</b>
			0
	Programme and Supplementary Services	17,498.87	17,499
	<b>Total INDIRECT COSTS</b>	<b>17,498.87</b>	<b>17,499</b>
			0
	<b>TOTAL BUDGET</b>	<b>286,712.18</b>	<b>286,712</b>

0.00

Cost per beneficiary	6.87
	47.31
	52.69

## ANNEX 1

PRODUCTO	NECESIDADES
formación continua en tema de salud y control vectorial, manejo de BTI y apoyo psicosocial.	Curso de Control Vectorial y manejo del BTI
	Sesiones de Intervención de Apoyo Psicosocial
	Kit de Apoyo Psicosocial
	Taller Nacional con Epidemiólogos de Silais Central y Municipios
Información sobre la prevención y la detección precoz de los signos de complicación enfermedad de trasmisión vectorial en los departamentos atendidas	Charla de Sensibilización sobre Control Vectorial, y detección Temprana de Señales de Peligro
Comunidades con información sobre la prevención y la detección precoz de los signos de complicación enfermedad de trasmisión vectorial en los departamentos atendidas.	Sesiones sobre manejo integrado de vectores, BTI, saneamiento y prevención de enfermedades de origen vectorial
campaña de información, sensibilización y comunicación sobre la prevención y Eliminación del criaderos de mosquitos y reducción de virus por Dengue, Zika y Chinkungunya para la promoción de elementos claves de cambios de comportamientos relacionados a la protección del personal de apoyo a la niñez, y sus familias	Sesiones para Elaboración de Plan de Comunicación
	Diseño de herramientas y materiales comunicacionales
	Combustible para Visita a medios de comunicación para informar a la población sobre las medidas de protección y acciones para erradicar el virus de dengue, zika y Chinkungunya.
	Voluntarios para Visita a medios de comunicación para informar a la población sobre las medidas de protección y acciones para erradicar el virus de dengue, zika y Chinkungunya.
	Combustible para Promoción de Ferias de Salud Comunitarias (3 ferias Masaya; 3 ferias Rivas; 2 ferias Managua)
	Voluntarios para Promoción de Ferias de Salud Comunitarias
	Combustible para Promoción de Ferias de Salud Comunitarias
	Perdiem para Promoción de Ferias de Salud Comunitarias
	Equipamiento de Kit para la red de Comunicadores (Gorra, Chaleco, Bolso, Camisa, Afiches, Brochures)
	Campaña de Difusión de Mensajes (Spot Televisivo, Mopi, Viñetas Radiales, Valla Publicitaria)
Reproducción de Material Educativo (Afiches, Banners, Rotafolio y Volantes)	

<p>Movilización de la comunidad para el control vectorial, en los departamentos de Masaya, Chinandega y Managua.</p>	Mapas de Riesgos para Elaboración de Plan de Intervención Comunitaria de control vectorial
	Visitas Domiciliarias para la sensibilización y prevención del virus del Dengue, Zika y Chikungunya e identificación de signos de peligros.
	Jornadas de eliminación de criaderos en coordinación de líderes comunitarios , ESAFC, ministerio de salud, para aplicación de BTI
	Combustible para Jornadas de eliminación de criaderos en coordinación de líderes comunitarios , ESAFC, ministerio de salud, para aplicación de BTI
	Kit de Identificación (Lupa, Larvero, Lámpara, Centímetro)
	Kit de Protección (Repelente, Gorra, Camisa Manga Larga)
	Compra de Bomba Termonebulizadora
	Combustible para Bomba Termonebulizadora
	Compra de BTI para prevención de criaderos
<p>Participando de escuelas en medidas de control vectorial para la prevención del Dengue, Zika y Chikungunya</p>	Mapas de Riesgos para Elaboración de Plan de Intervención Comunitaria de control vectorial
	Brigadas escolares en Control Vectorial por cada centro educativo Comunitaria de control vectorial
	Voluntarios para Sesiones de brigadas escolares en Control Vectorial por cada centro educativo Comunitaria de control vectorial (20 Refrigerios * 8 Sesiones)
	Jornadas de identificación de criaderos en cada centro educativo
	Perdiem a Voluntarios para Promover charlas informativas sobre la prevención y la detección temprana del Dengue, Zika y Chikungunya.
	Combustible para Promover charlas informativas sobre la prevención y la detección temprana del Dengue, Zika y Chikungunya.
	Kit de Identificación (Lupa, Larvero, Lámpara, Centímetro)

<p>Acciones de limpieza, erradicación de criaderos en familias y escuelas</p>	Realizar un plan de acciones de Saneamiento y Promoción de la Higiene
	Voluntarios para Limpieza comunitaria y eliminación de criaderos en municipios atendidos
	Combustible para Actividad Limpieza comunitaria y eliminación de criaderos en municipios atendidos
	Voluntarios para Campañas de limpieza en 8 centros educativos
	Kit para saneamiento y promoción de la higiene