

PROGRESS REPORT

CITIZEN PARTICIPATION & DEVELOPMENT INTERVENTIONS

Progress reports should only be made for grants covering a period of 24 months or longer. If the grant period is shorter than that, a final report will suffice.

PURPOSE

The progress report is the Danish organisation's report to the Civil Society Fund. Your reflections are important for documentation and learning. Accordingly, the local partner is not supposed to write the report on its own.

The progress report can be used as a tool in your partnership to enhance transparency and joint responsibility as described in CISU's thematic paper on *partnerships*, which is available at CISU's website: <https://cisu.dk/temapapirer>

The progress report is also added to the Danish organisation's track record and will be taken into account in future assessments of applications from the Danish organisation involving the same or other partners in line with the Guidelines for the Civil Society Fund.

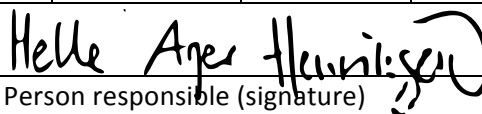
CISU aims to send feedback on the report to the Danish organisation no later than two months after CISU has received the report.

The total report must not exceed 5 pages (plus the cover page and Annex 1: Budget revision).

Danish applicant organisation	DIB				
Contact person's name	Helle Ager Henriksen				
Contact person's e-mail address	bolivia@dib.dk				
Intervention title	NEXTCAP				
Reference number	19-2436-UI-sep				
Country(-ies)	Bolivia				
Reporting period	January 13 th 2020 – March 13 th 2021				
Status on meeting the objectives at the end of this reporting period	Delayed	Partly delayed	According to schedule	Partly ahead of schedule	Ahead of schedule
		x			

12/3-21

Date



Person responsible (signature)

HELLE AGER HENRIKSEN

Person responsible (in capital letters)

1. Status of implementation

1.1 Briefly describe how far you are towards meeting the intervention's objectives and outcomes (expected results) as originally set out in the application.

- For Development Interventions, please also assess the status of the indicators.

The NEXTCAP intervention is based on completing three pillars of activities: research, capacity building and citizen engagement, while promoting learning activities in the local communities and regional health institutions.

During the first year of the intervention, activities have been seriously affected by the Covid crisis, which forced several months of complete lockdown in the country, and an even longer lockdown in indigenous communities such as our first working site, Tumupasa (see 2.1.). During this period, we also had to face a complex political situation due to the change of government in October 2020 and the sub-national elections (march 2021), plus serious modifications on the public education system due to the Covid crisis (see 2.1.). Nevertheless, the NEXTCAP team has been working hard to adapt to the situation and pursue the intervention's objectives.

The 1st objective of the initiative seeks to make people more aware of causes of diseases, their symptoms and ways to prevent them. As a result of the challenges faced (see 2.1.), the percentage of people attending activities during the intervention has been reduced in the first community (the Tacana indigenous community of Tumupasa), thereby resulting in less awareness than expected.

Participatory research aiming to generate local capacities and create awareness among citizens on threats for health posed by mosquito populations present in their area has so far been carried out in Tumupasa in November and December 2020. Twenty-seven members of the community (85% of them students from the Tumupasa school, more than 90% of them being women) received a two days training, where they learned about mosquitoes, capture techniques and principles for the identification of species for public health and veterinary importance. Using the guidelines received to set traps for mosquitoes, trainees were part of the pilot sampling campaign aiming to identify the species of mosquitoes present in their houses, neighbourhoods and community. As a result, eight different species of mosquitoes were identified in the five neighbourhoods of Tumupasa, including the main vector for important tropical diseases such as dengue, zika and chikungunya (*Aedes aegypti*); a specie of Anopheles mosquito considered potential vector for Malaria - whose incidence increased last year in the region-; Culex mosquitoes reported as vectors for different types of encephalitis both in humans and domestic animals; and species of mosquitoes that may transmit Avian Pox, an important threat for small scale poultry production, which is predominant in the Tacana indigenous communities. This constitutes the first effort carried out in this indigenous community aiming to approach the diversity of mosquitoes present in the area and their potential role to transmit diseases in human and animal populations. The engagement of members of the community during the sampling activities was important to develop awareness on the importance of mosquitoes, their diversity and the importance of controlling their populations to prevent mosquito-borne diseases. More than 40 households were visited during samplings and family members received information on the role of mosquitoes on diseases transmission and reduction of risks through mosquito populations' control.

Activities aiming to promote awareness in the public school system to prevent and control mosquito populations in their community were seriously affected due to the cancelation of school activities in Bolivia as a means to prevent Covid transmission (see 2.1.). To face this situation, methodologies are being adapted to fit the present education conditions, where students are still not having regular classes. Despite the delay, in the next months, learning material will be ready to share with students from Tumupasa and training activities will take place. Once its efficacy is evaluated, the training material will be adapted and transferred to the Caranavi and La Asunta communities. Additionally, the generated material will be used

to reach a broader population in the communities so that we can attend the first objective of the intervention (status of progress: 15%).

The **second objective of the intervention** seeks to establish a more sustainable infrastructure in the region to prevent and handle disease outbreak. To do so, intersectorial meetings are done regularly with our health and research collaborators (SEDES, SENASAG, IINSAD, LCCB). In coordination with them, we defined the need of developing a local mobile application to promote a community-based surveillance system for mosquitoes. The application will be based and used as support for the present mosquito surveillance system implemented by SEDES technicians. We are currently in the process of developing the tool, so we can test it and improve it in order to apply it in the working area (status of progress: 20%).

Objective 3 of the intervention is to promote awareness among local governments and health authorities so that health issues on communal and regional decision-making are considered. At the local level, meetings to share the obtained results with members of the community and their local authorities were organized in February 2021, but reached by a limited number. The low participation was attributed to the political situation (see 2.1.), since most authorities and many people were prioritizing their participation in political campaigns for their parties. This situation affected the planned activities destined to elaborate locally adapted strategies to reduce mosquito populations and the risk of them transmitting diseases, which be assumed and promoted by local authorities. Following the meeting participants' suggestions, the activity aiming to elaborate local strategies to reduce the risk of mosquito-borne disease transmissions has been postponed until the new municipal authorities will assume their positions (end of May 2021).

At the regional and national level, our local partners in SEDES and the Ministry of Health (MS) took an active part in the preparation of the field samplings in an area, where little information was available although presenting ideal conditions for the presence of important diseases such as dengue or zika. The health authorities showed a great interest in the development of the suggested mobile application (see objective 2) as a potential tool to be implemented by their technicians at the regional and even national level, as a means to strength their capacities to do surveillance of mosquitoes (status of progress: 20%).

The good communication and involvement of health authorities in the developed and planned activities mentioned so far, is contributing substantially to the achievement of **objective 4 of the intervention**, which seeks to increase Teko Kavi's capacities to become a key partner for future initiatives aiming to increase regional sustainability related to health and livelihood of rural communities. In order to increase the organisation's role on health education, training programs for internships destined to students from different backgrounds such as psychology and veterinary medicine are being elaborated in order to promote the One Health approach among future professionals in Bolivia. Both activities will allow us to reach the fourth objective of the initiative, aiming to increase Teko Kavi's capacities to implement participatory health activities and education to improve health and livelihood in rural communities (status of progress: 25%).

Even if many of the NEXTCAP activities had to be delayed due to the Covid crisis, we think that the adaptation strategies implemented so far and the planned changes on our strategies to reach local populations will allow us to complete all the intervention's objectives and outcomes.

2. Challenges, learnings, and adjustments

2.1 Describe the main challenges faced so far. E.g. in relation to developments in the context, the partnership, or relations to the target groups.

- For Development Interventions, please also reflect on how the potential risks set out in the original application have evolved in the context.

Shortly after starting the project activities, as the rest of the world, Bolivia had to face the Covid-19 crisis. From March to May 2020, Bolivia implemented a complete lockdown in the country to prevent the disease,

followed by a dynamic lockdown until July, where trips around the country were not allowed. In most indigenous territories of the Amazon region, due to the inexistence of health services, people decided to isolate their communities from the rest of the country to reduce the risk of an introduction of the disease. This was the case of the Tacana indigenous community of Tumupasa, our first working site, where the community was closed for visitors until September 2020. This situation impeded the field activities to start in April as planned. Since field activities were not possible, during the first months of the initiative, we focused our efforts on implementing training activities and generate training material (a video clip) for our local health partner (SEDES La Paz) as a means to help them respond to the Covid crisis.

Once trips across the country were allowed in October, we visited our first working site (Tumupasa) to coordinate the beginning of our activities. Nevertheless, the new schedule was affected by the development of the national elections in October 2020, a process that was considered a little bit critical due to the constant cancelation of the elections due to the Covid crisis (three cancelations since March 2020), and due to the susceptibility that this caused on many people from different parties. Fortunately, the social uprising observed during the elections in 2019 was not observed in 2020, so in November we could effectively start the trainings and the participatory sampling activities. In January, some flooding occurred in the San Buenaventura municipality as a result of the rainy season, thus forcing us to modify once again our working schedule. And lastly, the other challenge we had to face in February was the development of the sub-national elections on March 7th. This last event has particularly affected the intervention activities, since an important part of the local authorities and community members took part in the political activities, thus not focusing any more on the project activities. The new authorities will assume their functions in May, thus we need to wait some months before knowing if the responsible of the health programs we are working under (very effectively so far) at the health services (SEDES and SENASAG) will be removed.

Despite the delays caused by such a strange year, we expect that changes in strategies to implement our activities will allow us to achieve our objectives during the time of the intervention.

2.2 What are the most significant learnings so far? And how do you plan to apply these learnings to the intervention going forward?

During the first year of the intervention, which took place in very challenging conditions, maybe the most important lesson learned was the importance of being flexible to adapt to permanent changing conditions. We had to review times to implement the planned activities, and identify more effective strategies so that activities can be done in a shorter time than planned. This was the case for the planned participatory adult mosquito-sampling campaigns, where we had to reduce the days for sampling (only one day per neighbourhood). To complete the generation of data, we implemented another sampling strategy, where we sampled mosquito larvae instead of adult mosquitoes. This methodology modification was very positive and provided useful information not only at the local level but also for our collaborators at the national and local health services.

Due to Covid, the planned training sessions with school students couldn't take place, since classes in Bolivia were cancelled from March until the end of the school year 2020 (December). The school year 2021 started in February and requires students to attend classes physically only once per week. This situation forced us to identify strategies that will likely reduce physical meetings (reducing the risk of Covid transmission). Realizing that the use of the WhatsApp application increased exponentially in Tumupasa during the lockdown, gave us a clue on the potential of using this application as a means to share information with our target groups. Thus, short information and educational video clips aiming to create awareness and inform about mosquito-borne diseases preventive measures, will be created and shared through this mobile

application. By doing so, we expect to reach an important part of the Tumupasa community. If effective, we will expand the experience to use this diffusion strategy in the other two working sites (Caranavi and La Asunta).

2.3 Describe any adjustments made to the intervention strategy and/or activities. If some activities were planned but not carried out, describe these one by one, briefly stating the reasons.

Due to the lockdown conditions, many of the planned activities had to be delayed. At the moment, we can't yet start the activities in two of the working areas (Caranavi and La Asunta) since we still need to complete the activities in Tumupasa, where most of the learning and training material will be generated for its transfer to the other two working sites. Despite a couple of months of delay, we expect to start our activities in Caranavi during the coming two months.

One of the activities planned for Caranavi and La Asunta was the implementation of participatory mosquito-sampling aiming to identify the species of mosquitoes present in the area. Through our collaborators at the La Paz health service (SEDES LP) we were informed that, contrary to the situation in Tumupasa, this information is already available for those areas. Thus, mosquito samplings will not take place there and the activities will focus on identifying diseases with zoonotic potential on domestic animals, the dissemination of the available information on mosquito species, diffusion of preventive strategies and promotion of community-based surveillance systems to detect risk factors for the transmission of mosquito-borne diseases.

In order to promote community-based surveillance systems to identify species of mosquitoes that may become a health threat (particularly the species *Aedes aegypti*, responsible of the transmission of diseases such as dengue, zika and chikungunya), we proposed the adoption of a commercial application to detect mosquitoes. In our search, we identified the A-Buzz application, developed by the University of Stanford, as a good option. Unfortunately, our collaboration with Stanford (with whom we signed a collaboration agreement) has collapsed due to the Covid crisis. In a recent meeting with our local collaborators in La Paz, we defined that a better option would be to develop a local application that can be adapted to our target groups and reach the needs of our health services. In the coming period, we will work on this direction in close coordination with the local and national health services. By doing so, we expect that the use of the mobile-mosquitoes-surveillance-application to be developed, will have good chances to be used in the long term by our target groups.

2.4 Provide an assessment of how realistic it is to achieve the objectives of the intervention. Is there a need for revising the original objectives?

Despite the challenging conditions in 2020, which caused delays in most of the activities, so far, we've managed to implement an important part of the planned activities for year 1. Based on this, we are being positive towards achieving the objectives of the intervention and don't see a need to revise the intervention objectives at the moment.

3. Monitoring of the intervention

*This section relates to **both substantive and financial monitoring of the intervention**. Remember to include both in your response.*

3.1 What monitoring initiatives have been carried out since the beginning of the intervention?

According to our initial activity plan, a project visit by the Danish coordinator, including substantive and financial monitoring, was planned for February 2021. Due to the Covid crisis, the scheduled visit turned into a 10 days monitoring at a distance event held from February 22nd – March 3rd 2021 on Zoom. During the monitoring, DIB and Teko Kavi carried out meetings with primary local partners including SENASAG (The national veterinary service), SEDES (The regional health authorities) and IINSAD (The Research Institute of Health and Development at San Andrés Mayor University). Moreover, we met with the indigenous women's counsel of the Tacana people in Tumupasa (CIMTA), who as representatives of the primary target group and participants of the training activities carried out in 2020 allowed both DIB and Teko Kavi to understand the complex living conditions and challenges faced by the project community of Tumupasa, and the great capacity building potential in carrying out participatory research with local communards. In addition to the meetings with local partners, DIB and Teko Kavi also explored the possibility of carrying out online substantive and financial monitoring, following guides provided by CISU. During the monitoring, future activity planning, preliminary results and partner collaborations were discussed and evaluated in addition to reviewing the financial procedures including financial management, accounting, internal administrative procedures, control mechanisms, audit and accounts.

3.2 If the Danish organisation has carried out a monitoring visit to the partner(s), please describe:

- How did you conduct the monitoring visit, and what were the findings?
- How do you plan to follow up on your observations?

The main findings during the monitoring period were 1) a very healthy and strong collaboration between Teko Kavi and local partners and authorities, 2) a resilient and stable development intervention which, although delayed by the corona crisis and political events, is catching up on activities, adapting to challenges and finding new and effective solutions, 3) a healthy and transparent financial system within Teko Kavi and readiness to share information and guide DIB through the practises and 4) Dedicated and passionate project staff.

We plan to follow up on our observations and good collaboration by continuing our monthly meetings, where we discuss future planning, plan strategies to overcome unforeseen challenges and evaluate our progress. Although we are very keen on carrying out project visits during the next years, this online monitoring experience has also taught us, that online meetings do facilitate opportunities to meet, learn, discuss, evaluate and strengthen bonds between Danish NGOs, local partners and beneficiaries.

4. Budget adjustments

4.1 Has the budget been adjusted or have funds been reallocated from budget lines not requiring prior approval by CISU? (In accordance with sections 5.1 and 5.2 in the Administration Guide).

No adjustments were required in the budget during the 1st year of intervention.

5. Follow-up

6. Other observations or reflections

