

THE ROAD TO DEVELOPMENT IN Cochabamba

Newsletter on the Social Situation in the Department | 2011

CURRENT SITUATION

General Information	Bolivia	Cochabamba
Number of people living in extreme poverty - 2001	3,323,307	552,776
Children between 6 and 13 years of age not attending primary school - 2008	190,148	26,849
Students who completed primary school (8 th grade) - 2008	175,643	29,338
Adolescents between 14 and 17 years of age not attending secondary school - 2008	397,678	72,422
Students who completed secondary school (4 th grade) - 2008	120,440	20,831
Children who died before their first birthday - 2008	13,736	3,106
Children under three years of age suffering from chronic malnutrition - 2008	158,899	33,552
Mothers who gave birth outside the health system - 2009	91,982	15,733

RELEVANT DATA

- Four out of ten people were extremely poor in the department of Cochabamba in 2001.
- Primary school coverage in the department shows significant progress towards achievement of universal education as in 2008 net enrollment rate was at 92%, a rate slightly above the country average.
- Secondary education coverage in Cochabamba has shown a growing trend in time; the net enrollment rate increased to 52.5% in 2008.
- In Cochabamba, infant mortality rate in 2008 was 63 children per 1,000 live births. This means that in that year 3,106 children died before their first birthday.
- It is estimated that in 2008 there were 33,552 children under 3 years of age suffering from chronic malnutrition in Cochabamba.
- In the department, 34,381 institutional births were attended in 2009, which means that the percentage of deliveries attended by trained health care personnel was 68.4%.

The recent years have been a very important period for the improvement of living conditions of Bolivians and Cochabamba residents. Sustained reduction in poverty rates, increased coverage of primary and secondary education, lower infant mortality rates, improvement of the nutritional status of children, as well as increased coverage of institutional deliveries are clear examples of this development.

These advances, in part, are a result of continuity given to government policies adopted since the late twentieth century, as well as to new initiatives aimed at achieving the universal exercise of rights recognized by the Constitution. Policies such as conditional and unconditional transfers, a new health care model, and the new education law follow these lines.

In particular, the department of Cochabamba has shown important improvements in social indicators, particularly in the improvement of maternal health. However, the indicators related to infant mortality show less encouraging rates. The same holds true for the indicators on primary and secondary school, which are only similar to those found at the nationwide level. The evolution of several indicators of well-being both at the total nationwide and departmental levels has begun to show deceleration. This phenomenon is not a problem unique to Cochabamba or Bolivia since it affects or has affected countries that had achieved sig-

nificant improvement in social indicators. This situation reveals a need for new public policy mechanisms, improved participatory processes, increased attention to public service quality, new institutional coordination frameworks, both sector and territory-based, as well as new social oversight mechanisms.

The gaps in access to education and health care, lack of quality public services, and overall backwardness of certain groups in terms of achievement of better standards of living, are a central theme in the public agenda, as they are all problems that undermine the implementation of basic statements in the new Constitution: universal exercise of rights such as education, health care, non-discrimination, fair income, and jobs. In short, there is still much work to do to achieve universal exercise of social and economic rights, which, in turn, leads to strengthened democracy and to the exercise of full citizenship rights by all Bolivians. With this goal in mind, the Analysis Unit for Social and Economic Policy (UDAPE, in Spanish) and the United Nations System in Bolivia publish this newsletter to inform on and share knowledge about the status of the social situation in Cochabamba, so as to promote reflection and discussion about ongoing social public policies and supplementation with new necessary interventions to achieve concrete exercise of the citizenship rights enshrined in the new Constitution.

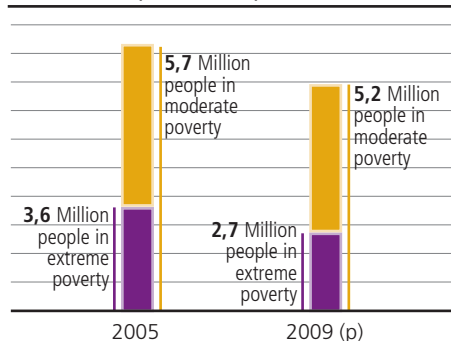


District 8 in the south zone of Cochabamba (Social Foundation Uramanta - FSU).

1 Reducing Extreme Poverty IMPROVED MATERIAL CONDITIONS FOR THE PEOPLE

In Bolivia, extreme poverty has declined significantly in recent years, particularly since 2007. In 2005, nearly four in ten people were extremely poor; by 2009 only one in four people was living in such condition. In absolute terms, in 2009 there were 2.7 million people who were not able to earn income to buy staple foods (which means extreme poverty). In the same year, 5.2 million people lived in moderate poverty.

BOLIVIA: NUMBER OF POOR AND EXTREMELY POOR PEOPLE (IN MILLIONS)

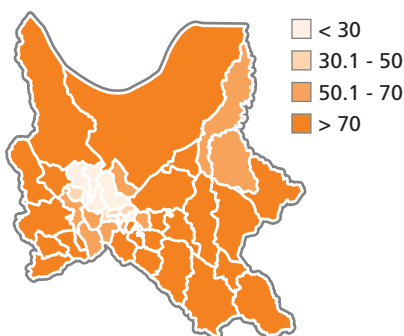


Source: UDAPE, (2010). (p): preliminary.

In Cochabamba, data for 2001 show that 39% of the people were extremely poor, which means there were 552,776 people living in extreme poverty. This figure was slightly lower than the national average of 40.4% registered in 2001.

Within the department, only the municipalities of Cochabamba (7.8%), Quillacollo (17.6%), and Colcapirhua (10.3%) had extreme

INCIDENCE OF EXTREME POVERTY – 2001



Source: The authors, based on UDAPE (2010).
Note: Data for municipalities are shown in summary table.

poverty figures below 20% in 2001 (see map). On the other end, Morochata (97.3%), Arque (98.6%), Tacopaya (98.6%), Tapacarí (98.1%), and Alalay (97.7%) had extreme poverty rates above 97% in the same year.

The figures for extreme poverty both in Bolivia and Cochabamba are significantly higher than the Latin American average as only 12.6% of the people in the region lived in extreme poverty in 2007.

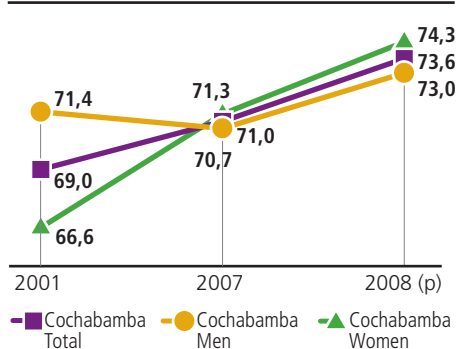


2 Primary School FOR ALL CHILDREN

The road to universal primary education, measured by increased access of children to this education level, shows significant progress. In 2008, 90% of children were enrolled in primary school. In Cochabamba, primary school coverage in 2008 reached 92%, which is a rate slightly above the national average.

Of a total of 337,385 children of primary school age in Cochabamba, 310,534 were enrolled, which means that **there were approximately 26,849 children between 6 and 13 years of age who did not attend primary school.**

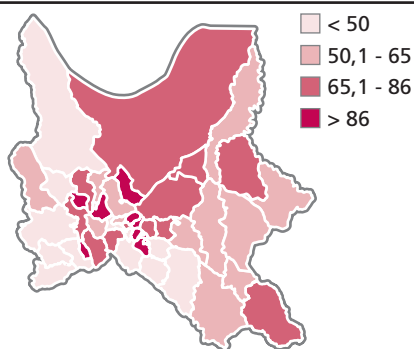
8TH GRADE COMPLETION RATE (%)



Source: SIE, (2010). (p): preliminary.

The 8th grade completion rate maintained a positive trend in the department. In 2008, this rate reached 73.6%; this rate is below the country average. On the other hand, the gap in completion rates between men and women has reversed in time. While in 2001 the rate for men was significantly higher than that for women, in 2008 the rate for women was more than one point above the rate for men (74.3% and 73%, respectively).

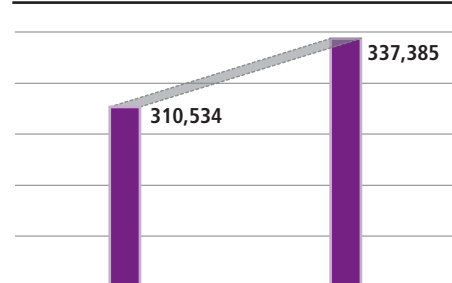
8TH GRADE COMPLETION RATE BY MUNICIPALITY (%) (p)



Source: The authors, based on SIE, (2010). (p): preliminary.
Note: Data for municipalities are shown in summary table.

Of the total of municipalities in Cochabamba, seven have completion rates of 8th grade of elementary school under 40%; these are: Arque (31.3%), Tacopaya (38.7%), Toko (39.3%), Alalay (10.1%), Chucumuella (29.8%), Tacachi (0%) and Vila Vila (28.2%). On the other end, the municipalities of Cochabamba (94.3%), Punata (109.7%), Villa Riveros (96.6%) and Vinto (93.2%) have 8th grade completion rates above 90%¹.

NUMBER OF ENROLLED STUDENTS AND POPULATION OF PRIMARY SCHOOL AGE IN COCHABAMBA, 2008 (p)



Population between 6 and 13 years of age enrolled in primary school

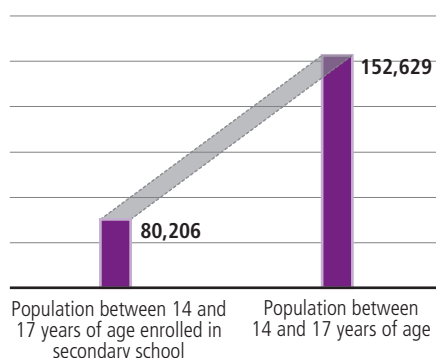
Source: SIE and INE for population projections, (2010). (p): preliminary.

1. Rates over 100% in some municipalities may be due to: (i) the fact that the population age range applied to the numerator and denominator is not the same, (ii) errors in population projection for people between 6 and 13 years of age.

3 Universal Secondary Education THE NEW CHALLENGE

In Bolivia, the coverage and completion rates of secondary school show a growing trend; however, these indicators are lower than those of primary school. In 2008, the percentage of adolescents between 14 and 17 years enrolled in school was 55% and secondary school completion rate, at 4th grade, was 56%. In the department of Cochabamba, secondary school coverage is close to the national average; secondary school coverage reached 53% in 2008.

► NUMBER OF ENROLLED STUDENTS AND POPULATION OF SECONDARY SCHOOL AGE IN COCHABAMBA, 2008 (p)

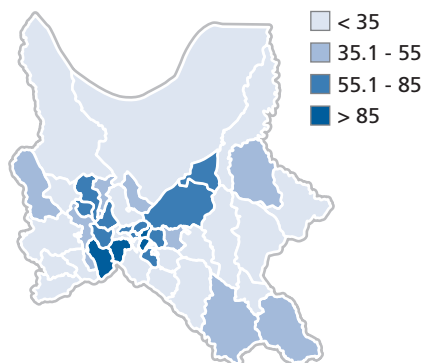


Source: SIE and INE for population projections, (2010). (p): preliminary.

Of a total of 152,629 adolescents of secondary school age in Cochabamba, 80,206 were enrolled, which means there were 72,422 young people between 14 and 17 years of age (47.5%) who did not attend secondary school in that department.

The completion rate of 4th grade of secondary school in Cochabamba maintains a positive trend, although it is below the national average. In 2008, it was 56.1%. Also, the gap between men and women has favored the latter. In 2008,

► 4TH GRADE OF SECONDARY SCHOOL COMPLETION RATE BY MUNICIPALITY (%) - 2008 (p)

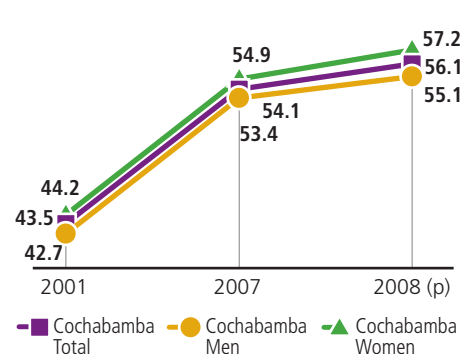


Source: The authors, based on SIE (2010). (p): preliminary. Note: Data for municipalities are shown in summary table.

the gender gap was 2.1 points higher for women (57.2% for women and 55.1% for men).

Of the 45 municipalities in the department of Cochabamba, five have completion rates of 4th grade of secondary school below 10%; those are Morochata (9.8%), Tacopaya (7.7%), Alalay (9.3%), Tacachi (0%), and Cuchumuela (0%). The only municipalities with completion rates of 4th grade of secondary school above 85% are Tarata (106.9%), Capinota (89.7%), and Punata (115.7%)².

► 4TH GRADE OF SECONDARY SCHOOL COMPLETION RATE (%)



Source: SIE, (2010). (p): preliminary.

4 Preventing Infant Mortality A DUTY FOR ALL

While infant mortality decreased significantly in the past 20 years in the country, Bolivia continues to be in the second to last position in terms of infant mortality in Latin America, only ahead of Haiti.

In 1989, out of every 1,000 live births, 82 children died before their first birthday at the

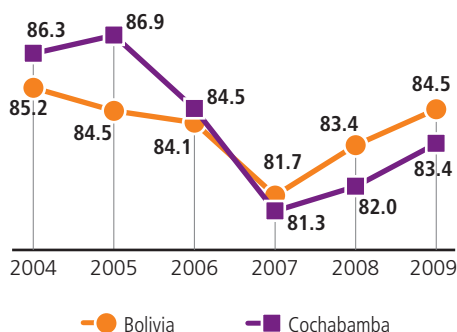
national level. In 2008, this figure dropped to 50.

The departments with the lowest mortality rates are Santa Cruz (31 per 1,000 live births) and Tarija (37 per 1,000 live births). In addition, the department with the highest

infant mortality rate is Potosí (101 per 1,000 live births).

In the case of Cochabamba, infant mortality in 2008 was 63 children per 1,000 live births, one of the highest rates in the country. **This means that 3,106 children died before reaching one year of age in the department in 2008.**

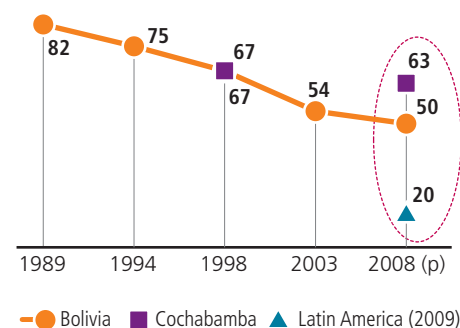
► PENTAVALENT VACCINE IN THIRD DOSE COVERAGE (%)



Source: UDAPE, (2010).



► INFANT MORTALITY RATE (FOR 1,000 LIVE BIRTHS)



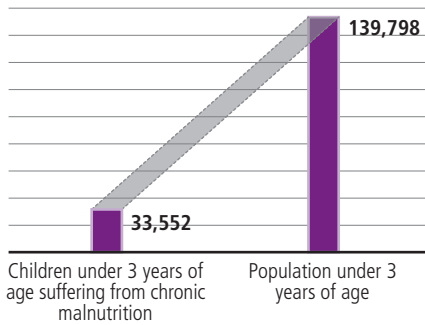
Source: INE (2010); ECLAC (2010), (p): preliminary.

2. Rates over 100% in some municipalities may be due to: (i) the fact that the population age range applied to the numerator and denominator is not the same, (ii) errors in population projection for people between 14 and 17 years of age.

5 Malnutrition ACHIEVING ADEQUATE NUTRITION FOR CHILDREN

The nutritional status of children in Bolivia has improved in recent years. In 1989, 37.7 out of every 100 children under the age of three were suffering from chronic malnutrition, which meant that they had insufficient height for their age. By 2008, this figure fell to 20 out of every 100. Chronic malnutrition is the most serious

NUMBER OF CHILDREN UNDER 3 YEARS OF AGE AND THOSE SUFFERING FROM CHRONIC MALNUTRITION IN COCHABAMBA, 2008

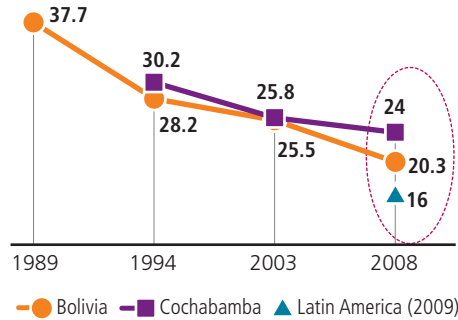


Source: UDAPE, (2010). INE, (2010).

type of malnutrition, since it affects the prospects of physical and mental development of children.

It is estimated that in 2008 there were about 33,552 children less than three years of age suffering from chronic malnutrition in Cochabamba. The department had a rate of

INFANT CHRONIC MALNUTRITION RATE AMONG CHILDREN UNDER 3 YEARS OF AGE (%)



Source: UDAPE, (2010). CEPAL, (2010).

24% in 2008, which is the fourth rate of chronic malnutrition in the country, after Chuquisaca (26.3%), Potosí (38.5%), and Oruro (28.5%).

If we compare these figures, we conclude that both Bolivia and Cochabamba have malnutrition rates significantly above those of Latin America, where 16% of children suffered from chronic malnutrition in 2008.



6 Maternal Health FOR THE HEALTH OF ALL MOTHERS

In Bolivia, for every 100,000 live births, 229 mothers died from complications during pregnancy or childbirth, (according to the latest data available for 2003)³. Bolivia is far from achieving the Latin American maternal mortality levels, where the regional average was 130 maternal deaths per 100,000 live births in 2005.

Delivery attendance provided by qualified personnel in Bolivia shows a positive trend and

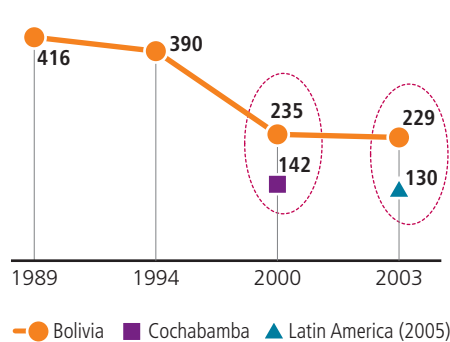
a 2-percent growth compared to 2008 (from 65% to 67% between 2008 and 2009, respectively).

In the department of Cochabamba, 34,381 births were attended by qualified personnel (institutional delivery) in 2009; in terms of percentage, 68.4% of births in Cochabamba were institutional deliveries. **This means that approximately 15,733**

Cochabamba mothers did not give birth within the health system.

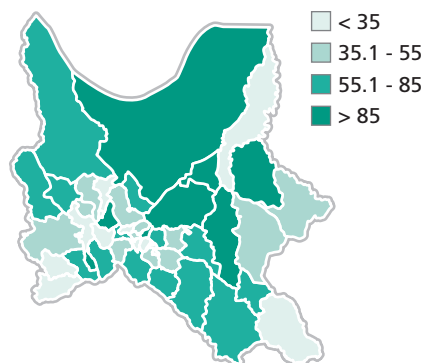
Of all the municipalities in Cochabamba, only 4 of them had rates of institutional delivery coverage under 30% in 2009: Tolata (26.4%), Sipe Sipe (29.3%), Tiquipaya (25.9%), and Tacachi (17.5%). On the other end, there are 7 municipalities with institutional delivery rates higher than 85%⁴.

MATERNAL MORTALITY RATE (PER 100,000 LIVE BIRTHS)



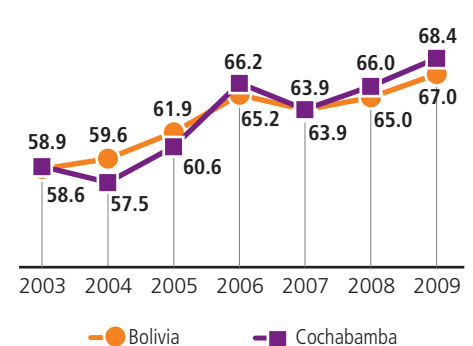
Source: UDAPE, (2010); ECLAC, (2010).

INSTITUTIONAL DELIVERY COVERAGE BY MUNICIPALITY - 2009



Source: The authors, based on UDAPE, (2010).
Note: Data for municipalities are shown in summary table.

INSTITUTIONAL DELIVERY COVERAGE (%)



Source: UDAPE, (2010).

3. The maternal mortality rate for 2008 was estimated at 310 per 100,000 live births. However, the data have been observed due to problems of statistical significance in the Demographic and Health Survey of the National Institute of Statistics and the Ministry of Health and Sport.

4. Percentages of institutional delivery above 100% can be a result of errors in the projections of births at the municipality levels, population migration in the municipalities, or the use of health services by people who do not reside in the municipality.

MUNICIPAL SUMMARY OF SOCIAL INDICATORS IN COCHABAMBA

Map Code	Municipality	Extreme poverty incidence 2001	Net primary school coverage 2008	8 th grade of primary completion rate 2008	Net secondary school coverage 2008	4 th grade of secondary completion rate 2008	Infant mortality rate 2001	Institutional delivery coverage 2009
1	Primera Sección Cochabamba	7.8	109.6	94.3	73.7	76.8	52.8	95.4
2	Primera Sección Aiquile	76.5	87.0	58.7	39.9	40.0	85.9	65.8
3	Segunda Sección Pasorapa	83.1	75.4	66.9	37.3	40.5	66.1	33.4
4	Tercera Sección Omereque	77.0	72.1	55.5	19.8	21.2	68.2	57.2
5	Primera Sección Ayopaya (Villa de Independencia)	93.0	101.7	59.6	34.7	36.0	106.2	67.7
6	Segunda Sección Morochata	97.3	70.9	45.3	12.7	9.8	96.7	60.6
7	Primera Sección Tarata	58.5	108.9	77.9	87.2	106.9	73.7	44.2
8	Segunda Sección Anzaldo	93.1	87.9	43.3	26.9	34.9	109.9	62.8
9	Tercera Sección Arbieto	43.6	78.7	43.7	13.5	13.5	70.5	58.2
10	Cuarta Sección Sacabamba	93.4	78.3	46.1	46.4	55.9	106.5	55.0
11	Primera Sección Arani	54.6	102.2	67.7	57.0	78.5	93.8	72.8
12	Segunda Sección Vacas	89.5	62.2	69.2	42.8	51.6	109.1	41.9
13	Primera Sección Arque	98.6	82.2	31.3	12.3	13.2	122.3	60.4
14	Segunda Sección Tacopaya	99.6	69.2	38.2	11.9	7.7	118.2	32.8
15	Primera Sección Capinota	62.8	97.3	78.6	61.5	89.7	67.4	62.8
16	Segunda Sección Santiviáñez	62.4	74.9	57.9	51.2	77.6	75.0	30.3
17	Tercera Sección Sicaya	94.4	117.6	86.5	39.5	37.0	85.4	92.0
18	Primera Sección Cliza	34.3	97.6	82.0	61.3	74.4	57.1	37.4
19	Segunda Sección Toko	64.7	69.6	39.3	21.9	17.5	66.5	30.8
20	Tercera Sección Tolata	36.3	69.4	53.6	43.2	61.4	48.9	26.4
21	Primera Sección Quillacollo	17.6	90.2	81.2	60.7	64.0	57.1	36.6
22	Segunda Sección Sipe Sipe	50.4	92.8	65.7	36.6	37.6	77.0	29.3
23	Tercera Sección Tiquipaya	24.7	64.3	51.9	38.1	39.9	57.5	25.9
24	Cuarta Sección Vinto	35.2	114.2	93.2	63.1	66.6	63.1	53.3
25	Quinta Sección Colcapirhua	10.3	48.6	44.5	33.2	36.2	54.7	39.0
26	Primera Sección Sacaba	26.4	68.0	52.4	34.4	34.3	62.5	46.2
27	Segunda Sección Colomi	68.6	127.0	87.5	51.4	52.9	87.4	57.1
28	Tercera Sección Villa Tunari	74.0	116.9	79.2	36.9	34.6	91.0	107.0
29	Primera Sección Tapacarí	98.4	72.8	42.9	15.5	13.5	111.1	52.9
30	Primera Sección Totora	88.4	125.1	59.6	21.2	25.2	86.8	86.0
31	Segunda Sección Pojo	84.5	73.7	50.3	22.1	11.0	84.6	50.3
32	Tercera Sección Pocona	87.2	99.7	55.0	23.3	25.6	94.4	60.0
33	Cuarta Sección Chimoré	62.5	79.8	60.5	32.5	28.2	89.6	32.6
34	Quinta Sección Puerto Villarroel	62.4	95.2	77.8	45.1	41.1	81.9	96.5
35	Sexta Sección Entre Ríos (*)	58.9	86.7	77.3	40.2	50.5	n.d.	0.0
36	Primera Sección Mizque	84.6	80.4	41.0	20.3	24.1	111.9	67.2
37	Segunda Sección Vila Vila	95.6	70.6	28.2	12.1	13.0	126.7	74.0
38	Tercera Sección Alalay	97.7	52.8	10.1	6.9	9.3	91.2	45.7
39	Primera Sección Punata (Villa de Punata)	27.1	122.2	109.7	100.8	115.7	65.6	142.6
40	Segunda Sección Villa Rivero	70.4	100.3	96.6	80.3	86.9	64.1	34.4
41	Tercera Sección San Benito (Villa José Quintín Mendoza)	40.5	91.8	86.9	59.2	72.8	72.3	38.7
42	Cuarta Sección Tacachi	65.4	17.4	0.0	0.0	0.0	65.6	17.5
43	Quinta Sección Cuchumuela (Villa Gualberto Villarroel)	83.3	65.9	29.8	0.0	0.0	73.9	30.8
44	Primera Sección Bolívar	96.7	70.2	44.4	20.3	20.3	126.7	42.4
45	Primera Sección Tiraque	72.5	108.3	82.5	51.1	58.4	94.4	95.0

Source: UDAPE, (2010); SIE (2010).

Indicator	Bolivia	Chuquisaca	La Paz	Cochabamba	Oruro	Potosí	Tarja	Santa Cruz	Beni	Pando
Extreme poverty percentage (%) - 2001	40.4	61.5	42.4	39.0	46.3	66.7	32.8	25.1	41.0	34.7
Net primary school coverage (%) - 2008	90.0	84.3	90.1	92.0	93.5	90.3	85.3	88.9	96.3	96.8
Completion rate through 8 th grade (%) - 2008	77.3	57.5	87.8	73.6	88.9	66.1	74.8	77.8	74.4	63.1
Net secondary school coverage (%) - 2008	54.7	36.5	63.4	52.5	70.1	45.9	51.1	53.5	52.9	40.2
Completion rate through 4 th grade of high school - 2008	56.3	38.0	69.3	56.1	74.9	45.6	51.3	51.5	47.0	37.5
Infant mortality rate per 1,000 live births (%) - 2008	50	42	63	63	56	101	37	31	39	47
Percentage of chronic malnutrition in children under 3 years of age (%) - 2008	20.3	26.3	20.6	24.0	28.5	38.5	11.0	7.1	12.1	10.3
Maternal mortality ratio per 100,000 live births (%) - 2000	235	140	326	142	224	354	124	207	267	n/a
Institutional delivery coverage (%) - 2009	67.0	64.5	62.7	68.4	86.3	57.4	70.9	68.0	77.8	78.3

Source: UDAPE, (2010); SIE (2010).

REFERENCES

► Extreme poverty:

The nationwide indicator can be obtained periodically on the basis of household surveys. However, the representativeness of the estimates is insufficient to disaggregate indicators for smaller geographic areas such as department, province, and municipality. The calculation of this indicator for departmental and municipal levels was performed by UDAPE, INE, and the World Bank, by combining consumer spending estimates in the 2001 Census and three household surveys (1999, 2000, and 2001). This methodology cannot be replicated annually and data are available only for 2001.

► Primary and secondary school:

Data at nationwide, departmental, and municipal levels are obtained from administrative records available from the Ministry of Education Information

System, and population projection from the National Institute of Statistics.

► Infant mortality:

The infant mortality rate is estimated by both direct and indirect methods. The 2001 Census is one of the sources to measure the indicator by an indirect method and the National Demographic and Health Survey (ENDSA) provides historical information on births to estimate the indicator by means of a direct method.

► Child Malnutrition:

This indicator is calculated on the basis of ENSDA. It measures and shows the nutritional status of children under three years of age and provides a more accurate assessment of their condition.

► Maternal mortality rate and coverage of institutional deliveries:

The number of maternal deaths is calculated on the basis of ENSDA. For departmental disaggregation, the 2002 Post Census Maternal Mortality Survey was taken into account, but it collects information on maternal deaths which occurred in the year 2000. This information is not comparable to that obtained by means of ENSDA.

Institutional delivery is the childbirth that occurs within healthcare facilities or outside of those (i.e. at home), but is attended by skilled health care personnel (doctor, nurse and/or nurse auxiliary). It does not include home childbirth attended by midwives, although they may have been trained by health care personnel.

This newsletter is a joint effort by the Analysis Unit for Social and Economic Policy (UDAPE, in Spanish) and the United Nations Program for Development (UNDP). Its goal is to disseminate information on social indicators to promote and prioritize development topics in the national agenda. The ultimate goal of this initiative is to contribute toward achieving poverty reduction, access to education and health, gender equality, basic services, and protection of the environment. Information contained in this publication is based on official data from the Government of Bolivia and/or data provided by international organizations in the case of comparative information from the Latin American region.



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REFERENCE MAP

COCHABAMBA

