

THE ROAD TO DEVELOPMENT IN Tarija

Newsletter on the Social Situation in the Department | 2011

CURRENT SITUATION

General Information	Bolivia	Tarija
Number of people living in extreme poverty – 2001	3,323,307	129,020
Children between 6 and 13 years of age not attending primary school - 2008	190,148	13,276
Students who completed primary school (8 th grade) - 2008	175,643	8,323
Adolescents between 14 and 17 years of age not attending secondary school - 2008	397,678	21,704
Students who completed secondary school (4 th grade) - 2008	120,440	5,656
Children who died before their first birthday – 2008	13,736	469
Children under three years of age suffering from chronic malnutrition - 2008	158,899	4,039
Mothers who gave birth outside the health system - 2009	91,982	3,787

RELEVANT DATA

- One person out of three people was extremely poor in the department of Tarija in 2001.
- Primary school coverage in the department shows significant progress towards achievement of universal education as in 2008 net enrollment rate was at 85.3%. In spite of this rate, Tarija still has the second lowest rate in the country.
- Secondary education coverage in Tarija is below the national average, but it shows a growing trend; the net enrollment rate increased to 51.1% in 2008.
- In Tarija, infant mortality rate in 2008 was 37 children per 1,000 live births. This means that 469 children died before their first birthday.
- It is estimated that in 2008 there were 4,039 children under 3 years of age suffering from chronic malnutrition in Tarija.
- In the department, 9,226 institutional births were attended in 2009, which means that the percentage of deliveries attended by trained health care personnel was 70.9%.

The recent years have been a very important period for the improvement of living conditions of Bolivians and Tarija 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 Tarija has shown important improvements in social indicators, particularly the reduction of infant mortality and a decrease of child malnutrition rates. However, the development of education indicators, both in primary and secondary school in the department, show a performance that is below the averages 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 Bolivia or Tarija, as it affects or has affected countries that had achieved significant 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 Tarija, 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.



Children from the valleys of Tarija (Mateo Tapia – PROMETA).

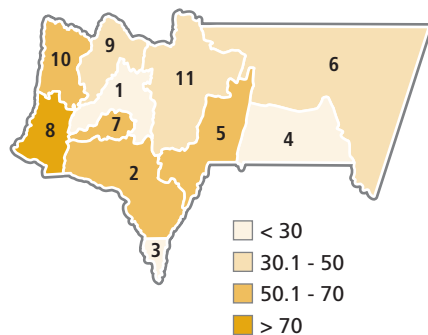
1 Reducing Extreme Poverty IMPROVED MATERIAL CONDITIONS FOR THE PEOPLE

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.

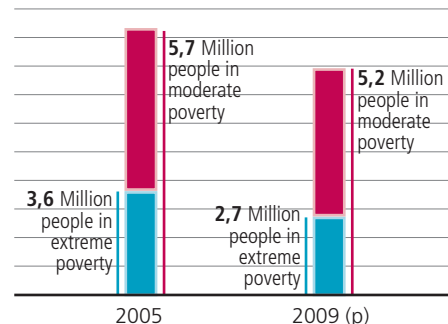
In Tarija, data for 2001 show that 32.8% of the people were extremely poor, which means there were 129,020 people living in extreme poverty. This figure was significantly lower than the national average of 40.4% registered in 2001.

INCIDENCE OF EXTREME POVERTY – 2001



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

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



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

Within the department, the municipalities of Yunchará (76.1%), Padcaya (55.9%), El Puente (58.5%), Caraparí (51.3%), and Uriondo (51.4%) had extreme poverty figures above 50% in 2001 (see map).

The figures for extreme poverty both in Bolivia and Tarija 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 Tarija, primary school coverage in 2008 reached 85.3%; this is the second lowest rate in the country.

Of a total of 90,530 children of primary school age in Tarija, 77,254 were enrolled, which means that **there were approximately**

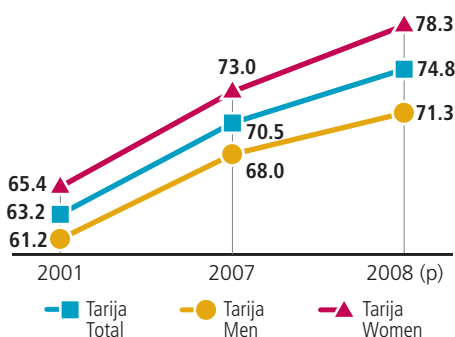
13,276 children between 6 and 13 years of age who did not attend primary school.

The 8th grade completion rate maintained a positive trend in the department. In 2008, it reached 74.8%; however this rate is over two points below the country average of 77%. On the other hand, it can be seen that the gap in completion rates between men and women has widened in time and it is noteworthy that in 2008 the rate for women was seven points

higher than that for men (78.3% and 71.3%, respectively).

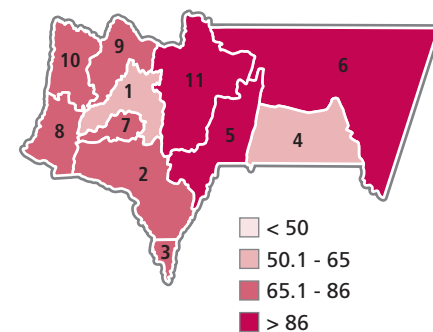
Of the 11 municipalities in Tarija, only four have completion rates of 8th grade of elementary school above 82%; these are: Tarija (82.2%), Caraparí (94.4%), Villamontes (107.6%), and Entre Ríos (86.6%)¹. On the other end, municipalities such as Yacuiba (60%) and Uriondo (57%) have 8th grade completion rates below 60%.

8TH GRADE COMPLETION RATE (%)



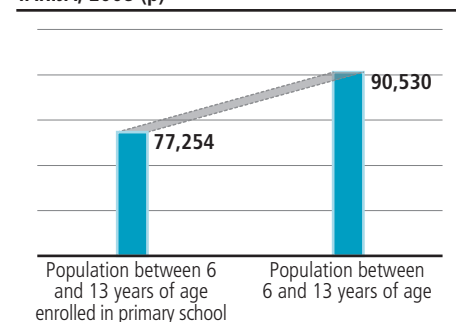
Source: SIE, (2010). (p): preliminary.

8TH GRADE COMPLETION RATE BY MUNICIPALITY (%) - 2008 (p)



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

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



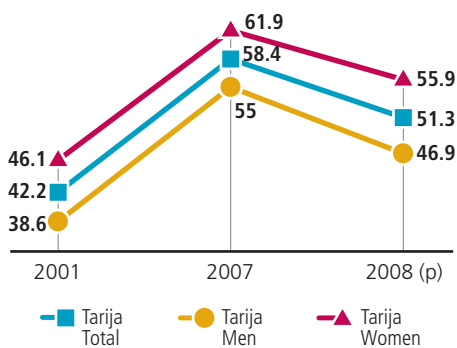
Source: SIE and INE for population projections, (2010). (p): preliminary.

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 Tarija, secondary school coverage is below the national average but it shows a growing trend; secondary school coverage reached 51.1% in 2008.

4TH GRADE OF SECONDARY SCHOOL COMPLETION RATE (%)

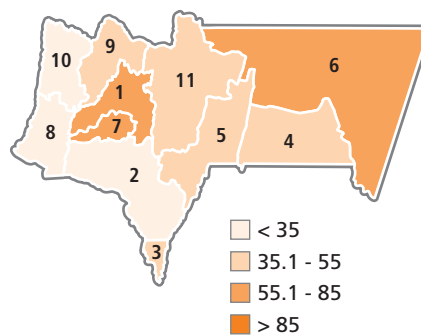


Source: SIE, (2010). (p): preliminary.

Of a total of 44,400 adolescents of secondary school age in Tarija, 22,696 were enrolled, which means **there were 21,704 young people between 14 and 17 years of age (48.7%) who did not attend secondary school in that department.**

The completion rate of 4th grade of secondary school in Tarija maintains a positive trend and in 2008 it was 51.3%; also, it can be seen that the gap between men and women is one of the largest in the country, with nine points

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

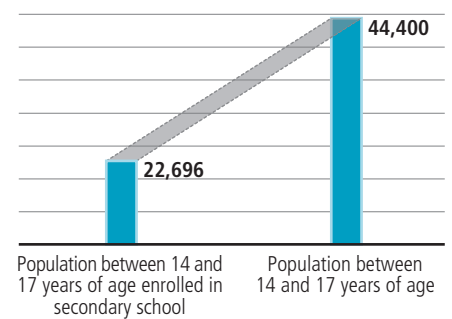


Source: The authors, based on SIE (2010). (p): preliminary. Note: Data for municipalities are shown in summary table.

of difference in 2008 for women (55.9% for women and 46.9% for men).

Of the 11 municipalities in the department of Tarija, only two have completion rates of 4th grade of secondary school above 60%; those are Tarija (62.8%) and Villamontes (64.4%). Among the municipalities with completion rates of 4th grade of secondary school below 30% are Padcaya (25.4%), El Puente (27.6%) and Yunchará (27.4%).

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



Source: SIE and INE for population projections, (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

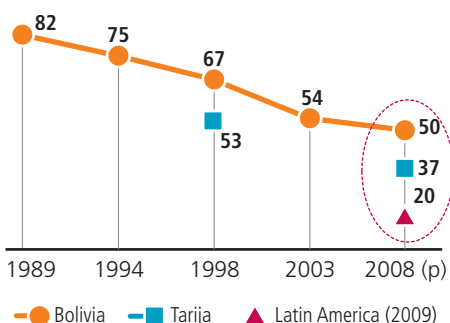
nationwide level. In 2008, this figure dropped to 50.

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 Tarija, infant mortality in 2008 was 37 children per 1,000 live births. This means that in 2008, **469 children died before reaching one year of age in Tarija.**

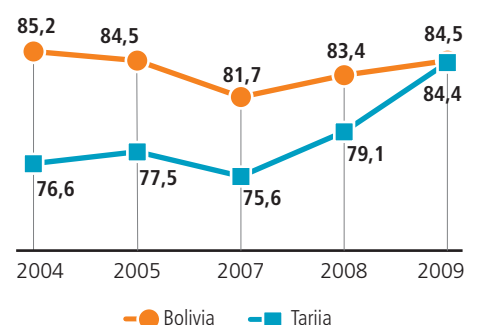
INFANT MORTALITY RATE (FOR 1,000 LIVE BIRTHS)



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



PENTAVALENT VACCINE IN THIRD DOSE COVERAGE (%)



Source: UDAPE, (2010).

5 Malnutrition ACHIEVING ADEQUATE NUTRITION FOR CHILDREN

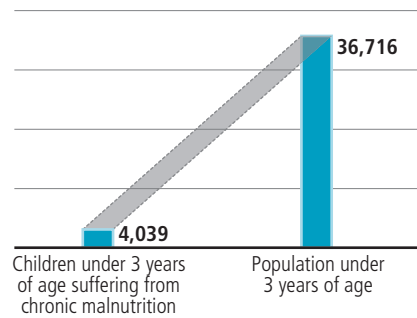
The nutritional status of children in Bolivia has improved in recent years. In 1989, 37.7 out of every 100 children under the age of three were suffering from chronic malnutrition, which meant that they had insufficient height for their age. By 2008, this figure fell to 20 out of every 100. Chronic malnutrition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

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

It is estimated that in 2008 **there were about 4,039 children less than three years of age suffering from chronic malnutrition in**



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

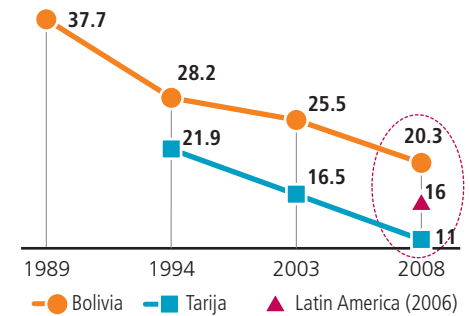


Source: UDAPE (2010); INE (2010).

Tarija. In terms of percentage, the department had a rate of 11% in 2008.

If we compare these figures, we can conclude that Tarija has lower chronic malnutrition rates than Latin America, where 16% of children suffer from chronic malnutrition.

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



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

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)². 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.

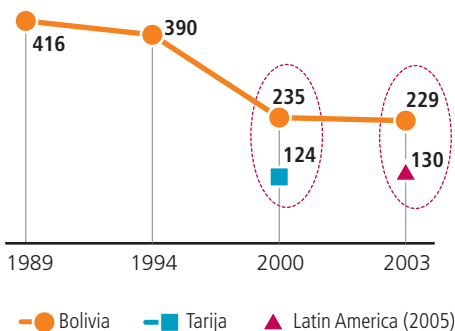
In terms of delivery attendance provided by qualified personnel, Bolivia shows a positive trend and a 2-percent growth compared to 2008 (from 65% to 67% between 2008 and 2009, respectively).

In the department of Tarija, 9,226 births were attended by qualified personnel (institutional delivery) in 2009; in terms of percenta-

ge, 70.9% of births in Tarija were institutional deliveries. This means that **approximately 3,787 Tarija mothers did not give birth within the health system.**

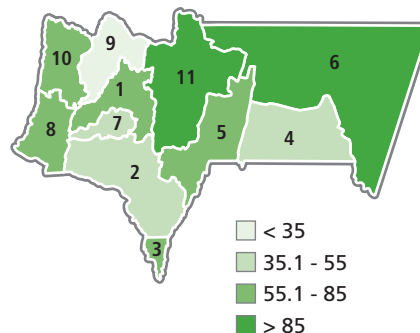
Of all the municipalities in Tarija, only 3 of them have rates of institutional delivery coverage above 75%: Tarija (77.8%), Villamontes (121.3%), and Entre Ríos (137.8%)³.

MATERNAL MORTALITY RATE (PER 100,000 LIVE BIRTHS)



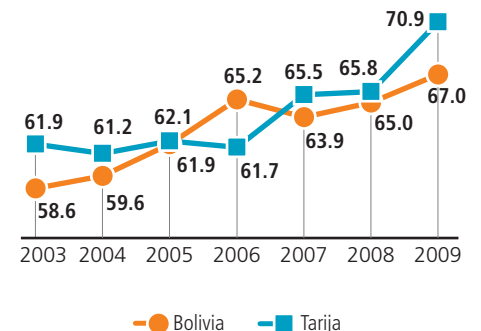
Source: INE, (2010); ECLAC, (2010).

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).

2. 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.

3. 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.

NATIONWIDE SUMMARY OF SOCIAL INDICATORS

Indicator	Bolivia	Chuquisaca	La Paz	Cochabamba	Oruro	Potosí	Tarija	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).

MUNICIPAL SUMMARY OF SOCIAL INDICATORS IN TARIJA

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 Tarija	23.9	86.9	82.2	62.6	62.8	38.3	77.8
2	Primera Sección Padcaya	55.9	88.8	71.5	26.5	25.4	56.6	40.1
3	Segunda Sección Bermejo	25.2	77.8	68.1	52.5	46.1	55.5	72.1
4	Primera Sección Yacuiba	28.5	68.7	59.9	38.4	39.5	51.7	54.9
5	Segunda Sección Caraparí	51.3	119.2	94.4	50.5	38.1	54.9	67.2
6	Tercera Sección Villamontes	38.9	138.5	107.6	68.1	64.4	52.4	121.3
7	Primera Sección Uriondo (Concepción)	51.4	84.5	57.4	46.3	56.6	60.7	48.0
8	Segunda Sección Yunchará	76.1	87.9	81.3	20.3	27.4	97.3	72.5
9	Primera Sección Villa San Lorenzo	49.6	82.2	65.7	40.9	48.0	68.2	28.6
10	Segunda Sección El Puente	58.5	101.5	68.1	33.7	27.6	67.3	62.7
11	Primera Sección Entre Ríos	43.4	91.1	86.6	44.2	45.7	68.2	137.8

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

The economy beyond natural gas



The authors of this report propose that we take a fresh look to this national debate. The challenge ahead might not be related to changing the economic model, but rather the pattern of development, which currently, with much or little state participation, concentrates the economic activity on few products for export. The ideal situation would be to transit from a natural gas-dependent economy towards one that generates jobs and wealth.

The report warns that while Bolivia has changed frequently its economic model, a development pattern that produces poverty still persists. The main feature of the current model consists in the particular configuration of the productive structure. Within the manufacturing sector, 83 percent of the labor force organized in small workshops and communities produces only 25 percent of income in the country. Meanwhile, 7 percent of the employees grouped in medium and large companies (with over 50 employees) generate 65% of the income. Therefore, Bolivian economy is very unfair, exclusionary, concentrating, and impoverishing. This reality has to be changed.

This publication can be found at:
<http://idh.pnud.bo>

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 ENSA. 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 ENSA. 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 ENSA.

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

TARIJA

