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## Operation Update Report

### Philippines: Re-emergence of vaccine preventable diseases (polio)

 International Federation  
of Red Cross and Red Crescent Societies

<b>Emergency Appeal n°</b> MDRPH032	<b>GLIDE n°</b> <a href="#">EP-2019-000110-PHL</a>
<b>12-month update:</b> 29 December 2020	<b>Timeframe covered by this update:</b> 28 September 2019 to 30 September 2020
<b>Operation start date:</b> 28 September 2019	<b>Operation timeframe:</b> 15 months ending on 31 December 2020
<b>Funding Requirements:</b> CHF 1,990,056	<b>N° of people being assisted:</b> 1.2 million <b>N° of people reached:</b> 777,120
<b>Red Cross Red Crescent Movement partners currently actively involved in the operation:</b> PRC is working with the International Federation of Red Cross and Red Crescent Societies (IFRC) in this operation. International Committee of Red Cross (ICRC) are also supporting PRC along with other in country PNS.	
<b>Other partner organizations actively involved in the operation:</b> Government agencies including the Department of Health (DOH), Department of Interior and Local Governments (DILG), Department of Public Works and Highways (DPWH), National Disaster Risk Reduction and Management Council (NDRRMC), Department of Social Welfare and Development (DSWD) and local government units are aiding affected households. International agencies such as WHO (World Health Organization) and UNICEF are also responding. OCHA, the Humanitarian Country Team and Health Cluster are also providing coordination.	

#### Summary of major changes:

*The emergence of the coronavirus (COVID-19) pandemic in the Philippines in March 2020 has to an extent, directed health system focus from vaccination campaigns for polio and measles, towards COVID-19 management. Consequently, some activities planned under the EPoA for Polio within the intended timeline had to be deprioritized, as it is not feasible to conduct those activities during the pandemic. Furthermore, incorporated COVID-19 safe operation to enhanced and facilitated deliverables under this Polio operation.*

*Changes include provision of personal protective equipment (PPE) to protect PRC staff and volunteers from COVID-19 infection in delivery of services in this operation. WASH activities, hygiene promotion and PGI activities were downscaled. Furthermore, there is a major downscaling of activities under Health particularly on activities under Outcome 2 due to the low income of the emergency appeal.*

*Any unexpended funds at the close of the Emergency Appeal will be transferred to the 2021 Operational Plan of the Philippine Country Office and earmarked to the PRC vaccine preventable diseases activities. IFRC and PRC will continue to advocate for longer term support to the Expanded Program on Immunization programme to reduce the impact of outbreaks in the future, seeking support for this initiative through the IFRC 2021 Philippines Country Plan.*

## A. SITUATION ANALYSIS

### Timeline

**19 September 2019:** The Department of Health (DOH) confirms the re-emergence of polio in the Philippines and declares a national polio outbreak.

**28 September 2019:** At the request of the PRC, the IFRC launches a DREF operation in response to polio outbreaks in the Philippines for an amount of CHF 336,302 to reach 30,000 children in the 0 to 59 age group through social mobilization, health promotion and oral vaccination against polio

**15 November:** As new cases continue to emerge, the polio emergency plan of action (EPoA) is revised and integrated as part of the revised emergency appeal MDRPH032 “Re-emergence of vaccine preventable diseases” (previously known as “Philippines: Measles Operation”). This revised Emergency Appeal supports the Philippine Red Cross in its operations against measles and polio. Although each operation has its respective EPoA, they have been placed under a common appeal to benefit from operational synergies and to improve efficiency. Under Emergency Appeal MDRPH032, the polio response plan is scaled-up to an amount of CHF 1,990,056 to reach 1.2 million people over 16 months and now includes mid-term routine immunization enhancement and epidemic preparedness.

**23 December 2019:** Operations Update no 2 for the polio outbreak is published

**6 January 2020:** The DOH announces the extension until April 2020 of the synchronized polio vaccination campaign “Sabayang Patak Kontra Polio”.

**16 March 2020:** Philippines raises the COVID-19 Alert System to Code Red sublevel 2 with consequent measures to combat the spread of the coronavirus.

**18 March 2020:** DOH suspends the Extended Vaccination Round until further notice, as the response to COVID-19 pandemic is prioritized.

## Description of the disaster

On 19 September 2019, the Department of Health (DOH) confirmed the re-emergence of polio (vaccine-derived poliovirus-VDPV) in the Philippines and declared a national polio outbreak, in accordance with international health regulations. It was declared after environmental samples taken in Davao City and Metro Manila tested positive, and a human case of circulating VDPV polio was reported in Mindanao. This was quickly followed by a second case of human infection in Laguna province, south east of Manila. The re-emergence occurs almost 20 years after the Philippines was declared polio-free in 2000 and the last case of wild poliovirus was recorded in 1993.

The declaration of a polio outbreak followed a confirmed Vaccine Derived Poliovirus Type 2 (VDPV2) case in a three-year old child in Lanao de Sur (Mindanao) reported on 16 September 2019. Subsequently, another VDPV2 case of polio was confirmed on 20 September, this time in a five-year-old boy who was immunocompromised from Laguna which is adjacent to Metro Manila.



To interrupt the transmission of poliovirus, infants and children aged 0-59 months are vaccinated with bivalent oral poliovirus vaccines (bOPV). A Volunteer nurse providing vaccine in the community (Photo: PRC)

As of June 2020, a total of 16 polio cases remain in the country including 13 cases of cVDPV2, one case with cVDPV1; one case with VDPV1; and one case with immunodeficiency related VDPV type 2 (iVDPV2). There have been no new polio cases reported after 15 February 2020.

The resurgence of polio in the Philippines came as the DOH and other partners were responding to dengue outbreaks and measles outbreaks. According to the Philippines Epidemiological Overview 2020, as of 8 February 2020, between 1 January to 8 February 2020, there was 25,502 cases of dengue and 38 deaths reported; as well as 1,433 cases of measles and 12 deaths<sup>1</sup>An increasing number of cases of diphtheria are also being reported, the DOH confirming 167 cases and 40 deaths in 2019 compared to 122 cases and 30 deaths in 2018<sup>2</sup>.

Since January 2020, the country, has been wrestling with the continuing spread of the COVID-19. The Philippines on 12 March 2020 raised the COVID-19 Alert System to Code Red sublevel 2 as recommended by the Inter-Agency Task Force on Emerging Infectious Diseases (ITAF-EID). This has imposed stringent measures on the country among which measures of social distancing, enhanced community quarantines and limitation of movement within the country which have had significant impact on polio outbreak response activities. On 16 March 2020, the entire Luzon was put on enhanced community quarantine until 13 April 2020, which was later extended until 15 May 2020. The DOH rapid

<sup>1</sup> DOH. *Dengue and Measles Philippine Integrated Disease Surveillance and Response (PIDSRS) (01 Jan-16 November 2019)*, published 24 February 2020. All data is subject to change after inclusion of delayed reports.

<sup>2</sup> ABS CBN News. *DOH says Manila student died of diphtheria*. Online at <https://news.abs-cbn.com/news/09/26/19/doh-says-manila-student-died-of-diphtheria>, published 26 September 2019.

response vaccination in selected areas of Region 3 and the third round planned for Mindanao, originally scheduled to begin on 23 March 2020 has been postponed until further notice.

These health emergencies occur while the government and its partners are also responding to the recent following natural disasters in the country: the earthquakes in [Mindanao \(MDRPH036\)](#), the [Typhoon Kammuri \(MDRPH037\)](#) in November 2019, it was then followed by [Typhoon Phanfone \(MDRPH038\)](#) in December 2019, then the eruption of [Taal Volcano \(MDRPH039\)](#) in January 2020.

## Summary of current response

### Overview of host National Society

PRC is leading the International Red Cross and Red Crescent Movement response to the outbreaks. The following activities are ongoing, and others being initiated in consultation with DOH, following the declaration of the polio outbreak:

- In accordance with PRC response Standard Operating Procedures (SOP), the OpCen is on call 24/7, monitoring the situation; and providing regular updates to leadership staff.
- At the national level PRC is coordinating with DOH Epidemiology Bureau to continue updating and monitoring of cases. For relevant information sharing and support, PRC continues to engage and coordinate with the National Capital Region (NCR) Infectious Diseases Cluster.
- In support of DOH, PRC alerted its local chapters to activate community-based volunteers (RC143) and chapter-based volunteers (RCAT) to organize health information dissemination, carry out active community surveillance and support vaccination as part of the work of the government regional and provincial epidemiology program.
- PRC prepared key messages on polio to be published through its different social media accounts to inform, educate and warn the public on the dangers brought by this disease outbreak.
- Planning meeting was held with NCR and three Mindanao Chapters on 3 October 2019.
- Technical review of plans of chapters of NCR and three Mindanao Chapters was held on 12 October 2019
- The Department of Health requested PRC for additional support for the City of Manila, considered ground zero for the outbreak of polio. Mobilization of volunteers and other stakeholders was done on 17 October 2019, where challenges and solutions were discussed.

The following table presents the DOH and PRC targets. This also shows the results achieved during the different rounds of vaccination during the “Sabayang Patak Kontra Polio” (SPKP) campaign:

Activity	Date	Area	DOH National Target	DOH National Output	PRC Target	PRC Accomplishment	
Round 1	14 to 27 Oct 2019	National Capital Region Mindanao selected areas (Davao City Davao del sur, Lanao del sur and Marawi City)	1,706,996	1,629,649	65,000	62,843	97%
Round 2	25 Nov to 7 Dec 2019	National Capital Region and all Mindanao areas	4.4 million	4,309,566	100,000	155,424	156%
Round 3	20 Jan to 2 Feb 2020	All Mindanao areas	3.1 million	3.1 million	60,000	105,417	176%
<b>Extended Mass Polio Vaccination</b>							
Extended rounds for Mindanao	17 Feb to 1 Mar 2020	All Mindanao areas	3.1 million	3,439,585	80,000	147,284	184%
	23 Mar to 4 Apr 2020	All Mindanao areas	3.1 million	postponed	80,000	Postponed due to COVID-19 priority	
	20 Jul to 02 Aug 2020	All Mindanao areas	3.1 million	NA	80,000	102,567	128%
Extended rounds for NCR	27 Jan to 7 Feb 2020	National Capital Region	1.2 million	1.4 million	80,000	114,617	143%
	24 Feb to 8 Mar 2020	National Capital Region	1. million	1.432,065	80,000	143,520	179%
Round 1	3 to 31 Aug 2020	Region 3 and 4A	2.5 million	NA	40,000	31,880	80%
Round 2	14 to 27 Sept 2020	Region 3 and 4A	2.5 million	NA	40,000	50,603	127%

Source: WHO/UNICEF Situation reports 15, 16 and 18 and PRC operational updates.

Since the last reporting period, PRC has participated in different vaccination rounds. Activities recommenced in July 2020 and the activities achieved by 27 September 2020 through the Mindanao and Region 3 and 4A Extended Polio Outbreak Response (supported by IFRC and ICRC).



Philippine Red Cross - Health Services  
Sabayang Patak Kontra Polio  
ACCOMPLISHMENT REPORT for Region 3 & 4A  
TARGET: 40,000 Children 5 years old and below  
ROUND 2 September 14-27, 2020



FINAL REPORT for ROUND 2 (September 14-27) in Region 3 & 4A  
**50,603 Children Vaccinated**

DATES COVERED	REGION	CHAPTER	TARGET No. of Children to be Vaccinated	ACCOMPLISHMENT	
				CHILDREN VACCINATED	PERCENTAGE OF ACCOMPLISHMENT
ROUND 1   Region 3 & 4A			40,000	50,603	127%
September 14-27, 2020	REGION 3	Bataan	1,600	2,534	158%
		Bulacan	500	1,556	311%
		Tarlac	2,000	3,712	186%
		Olongapo	1,200	455	38%
		Zambales	1,500	2,952	197%
	Pampanga	1,500	1,290	86%	
	REGION 4A	Laguna	22,000	25,624	116%
		San Pablo	350	875	250%
		Rizal	4,000	6,595	165%
		Cavite	4,000	5,010	125%

Supported by:



Philippine Red Cross - Health Services  
Sabayang Patak Kontra Polio in MINDANAO  
Accomplishment Summary : Vaccination Activities  
(Round: July 20 - August 2, 2020)

Target: 80,000 Children  
5 years old and below & 10 years old and below in  
Basilan, Sulu, Tawi-tawi, Zamboanga City, and Lambayong, Sultan Kudarat



FINAL REPORT for Round July 20 - August 2, 2020 | **102,567 Children Vaccinated**

REGION	CHAPTER	TARGET No. of Children to be Vaccinated	ACCOMPLISHMENT	
			CHILDREN VACCINATED	PERCENTAGE OF ACCOMPLISHMENT
MINDANAO			102,567	128%
REGION 8	Agusan del Norte	2,500	5,355	214%
	Agusan del Sur	1,500	2,363	158%
	Surigao del Norte	3,500	7,514	215%
REGION 9	Zamboanga City	12,000	27,394	228%
REGION 10	Bukidnon	1,500	1,301	87%
	Iligan	3,000	3,369	112%
	Gingoog	5,000	6,576	132%
REGION 11	Davao City	800	2,118	265%
	Davao del Norte	3,000	3,045	102%
	Davao del Sur	5,070	8,415	166%
	Davao Oriental	2,000	3,767	188%
REGION 12 - SOCCSKSARGEN	General Santos - Sarangani	2,000	3,131	157%
	Sultan Kudarat	3,500	4,382	125%
BARMM	Cotabato	3,500	3,574	102%
	Lanao del Sur	3,500	2,092	60%
	Sulu	4,000	8,792	220%
	Tawi-Tawi	6,500	9,379	144%

Supported by:



Apart from the health emergencies Re-emergence of Vaccine Preventable Diseases ([MDRPH032](#)) and COVID-19 ([MDRCOVID19](#)) operations, PRC, with the support of IFRC, is currently responding simultaneously to the following operations: Mindanao Earthquakes ([MDRPH036](#)), Typhoon Kammuri ([MDRPH037](#)), Typhoon Phanfone ([MDRPH038](#)) and Taal Volcano ([MDRPH039](#)) which started sequentially since September 2019.

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

On 28 September 2019, at the request of the PRC, IFRC launched a DREF operation in response to the polio outbreak in the Philippines for an amount of CHF 336,302. This DREF plan of action aimed to reach 30,000 children under 5 through social mobilization, health promotion and oral vaccination against polio. This polio operation plan of action was then revised and integrated, with the Measles Outbreak Emergency Appeal, under a single overarching Emergency Appeal, namely "Re-emergence of Vaccine Preventable Diseases" ([MDRPH032](#)), published on 13 November 2019.

Under this Emergency Appeal, the polio operation is scaled-up to an amount of CHF 1,990,056 to reach 1.2 million people over 16 months and now includes mid-term routine immunization enhancement and epidemic preparedness. With the new single Emergency Appeal, PRC and IFRC aim to increase synergies between the two responses and rationalize resources, mostly human resources, already in high demand among all operations led by PRC.

For this operation, the IFRC Country Office (CO) is coordinating with the IFRC Asia Pacific Regional Office (APRO), based in Kuala Lumpur, in accordance with the IFRC secretariat's Emergency Response Framework. The IFRC CO has a dedicated operations manager and a health manager who provide technical support to the PRC as requested. The IFRC APRO rapid response desk also coordinates with other National Societies. The latter contributed financial resources, see [donor response](#), and deployed specialist surge support with public health and PMER profiles to support this operation.

The IFRC CO coordinates with Partner National Societies (PNS) in Philippines, including the American Red Cross, Canadian Red Cross Society, Finnish Red Cross, German Red Cross, Japanese Red Cross Society, Netherlands Red Cross and the Spanish Red Cross. PRC is also supported by the International Committee of Red Cross (ICRC) in this polio response for selected areas with high security risks, particularly in Mindanao. For larger scale disaster situations, the ICRC, the IFRC and the PRC refer to the Movement Coordination Agreement for cooperation during emergencies. Reference is also made to the Access Map for Red Cross Red Crescent the Movement.

### **Overview of other actors in country**

#### ***Coordinating with authorities***

The [Republic Act 10072](#) (Philippine Red Cross Act of 2010) recognizes PRC as an independent, autonomous, non-governmental organization auxiliary to the authorities of the republic of the Philippines in the humanitarian field. Since the establishment the National Disaster Risk Reduction and Management Council (NDRRMC), PRC has served as one of the original member agencies and the only non-government agency sitting in the council membership. As auxiliary to the public authorities, PRC maintains a strong relationship with government bodies through participation or collaboration with (i) the NDRRMC, (ii) the provincial, municipal and barangay (community) disaster risk reduction and management councils, and (iii) the local government units defined in the disaster risk reduction and management.

In this response, PRC works in close cooperation with the Philippines DOH, which is leading the "Sabayang Patak Kontra Polio" campaign at national and local levels.

#### ***Inter-agency coordination***

At country level, PRC and IFRC are observers to and participate in meetings of the Humanitarian Country Team (HCT) held both during disasters and non-emergency times. PRC and IFRC are involved in relevant government-led cluster information sharing, planning and analysis at all levels while IFRC supports PRC coordination efforts through representation in other relevant Clusters as required. In this response, PRC participates in the Health Cluster and Inter-Cluster Coordination Group meetings.

IFRC and PRC are coordinating with WHO and UNICEF on the response, sharing information and contributing to updates. WHO co-chairs the National Health Cluster coordination through NDRRMC mechanism led by DOH. Health cluster coordination meeting are held on a regular basis to discuss health partners' progress and possible interventions in the polio outbreak response. The Cluster is requesting partners to share their plans in support of the response, particularly in affected areas (Davao, Lanao del Sur and Metro Manila). In the actual COVID-19 pandemic context, the [WHO](#) reminded the importance of continuing immunization programs and warned that suspending vaccination could give rise to other health crises. During the pandemic, countries should still conduct polio vaccination where it is feasible and with appropriate infection control.

## Needs analysis and scenario planning

### Needs analysis

On 19 September 2019, Philippines declared a polio outbreak in the country with four environmental samples tested positive from Davao and Metro Manila. Currently, 17 cases are confirmed with vaccine-derived polio virus. There are 14 cases of cVDPV2, one case of cVPD1; one case of VDPV1; and one case of immunodeficiency related VDPV type 2. Philippines is affected by both cVDPV1 and cVDPV2. The cVPDV is considered a public health emergency of international concern (PHEIC).

According to the WHO, with an increasing number of human cases and environmental samples tested positive for poliovirus type 1 and 2, the risk of subsequent transmission of polio continues to be considered high at the national level, due to chronically sub-optimal vaccination coverage, sub-optimal performance of AFP surveillance, and poor sanitation and hygiene conditions. No new cases of polio were reported after 15 February 2020 in Philippines.

There is no cure for polio. It can only be prevented through the polio vaccine. To stop the spread of polio, at least 95 per cent<sup>3</sup> of people must be vaccinated. However, polio vaccination coverage in the Philippines has been steadily declining. According the WHO, the estimated vaccination coverage for children aged under one year with the required three doses of bivalent oral polio vaccine in the Philippines for 2018 was 66.8 per cent (compared to the recommended 95 per cent), and for the inactivated poliovirus (IPV) the coverage has been below 50 per cent since its introduction in 2016. In 2019, it was at 23 per cent.

### Targeting

On 6 January 2020, The DOH announced it was extending the polio campaign until April 2020 in all regions of Mindanao and the National Capital Region. The additional rounds for the “Sabayang Patak Kontra Polio” (SPKP) campaign were scheduled to address the reported positive polio cases from the Acute Flaccid Paralysis Surveillance in Mindanao and positive environmental samples in Metro Manila. With the extension of the campaign, the DOH aimed to achieve at least 95 per cent coverage in all identified areas for every SPKP round to ensure that there would be no child missed. For NCR, two (2) additional rounds were scheduled on 27 January – 7 February 2020 and 24 February – 08 March 2020. For Mindanao, an additional two (2) rounds for all regions in Mindanao scheduled on 17 February –1 March and 23 March – 4 April 2020. As mentioned, the round scheduled 23 March to 4 April 2020 has been postponed until further notice.

Extended Mass Polio Vaccination				
Vaccination Rounds	Dates	Area covered	National Target	PRC Target
Extended rounds for Mindanao	17 Feb to 01 March 2020	All Mindanao areas	3.1 million	80,000
	23 March to 04 April 2020	All Mindanao areas	3.1 million	80,000
Extended rounds for NCR	27 Jan to 07 February 2020	National Capital Region	1.2 million	80,000
	24 Feb to 8 March 2020	National Capital Region	1.2 million	80,000

For more details on this section, kindly refer to the [revised Emergency Plan of Action](#).

### Scenario planning

For this section, kindly refer to the [revised Emergency Plan of Action](#).

### Operation Risk Assessment

For this section, kindly refer to the [revised Emergency Plan of Action](#).

## B. OPERATIONAL STRATEGY

### Overall operational objective

The overall objective of this appeal is to contribute to preventing and reducing morbidity and mortality resulting from vaccine preventable diseases with a focus on the current declared polio outbreaks in the Philippines targeting 1.2 million people over 16 months.

This appeal covers the following objectives:

<sup>3</sup> Polio is a vaccine preventable disease and a herd immunity against polio can be achieved by immunizing at least 95 per cent people in a community.

- Respond to the national polio outbreak, in line with the DOH plan.
- Strengthen routine immunization for children below five years of age, by undertaking social mobilization through an extensive network of volunteers supported by strong PRC chapters.
- Establish and operationalize an epidemic preparedness plan for the Philippines (EP2) initiative.
- Strengthen PRC's planning, projection and modelling capacities for the outbreaks at all levels.

For immunization, the PRC will continue to conduct regular social mobilization and awareness activities and will ensure a steady improvement in the attendance rate of children during local immunization days. At the same time, the PRC will strengthen the capacity of the local chapters and governments' line departments in epidemic and pandemic planning, contingency planning, logistics, cold chain management and surveillance.

WHEN	WHAT	WHERE	WHO	TARGET
Jan – Dec 2020 (suspended as of 18 March 2020)	Strengthen routine Immunization.  Heighten environmental and acute flaccid paralysis (AFP) surveillance.	25 at most at risk chapters that either responded to measles and polio outbreaks or responded to any of the outbreaks.	Children, their family members and community people in general.	70,000 children.  300,000 people with hygiene promotion.  1.2 million people with messages.

More details can be found on the [revised Emergency Plan of Action](#).

## C. DETAILED OPERATIONAL PLAN

	<p><b>Health</b></p> <p>People reached: 296,690</p> <p>Male: 148,345</p> <p>Female: 148,345</p>				
<b>Outcome 1: The immediate risks to the health of affected populations are reduced</b>					
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>			
<i># of people reached to lessen immediate risks to the health</i>	90,600	296,690			
<b>Output 1.2: Target population is provided with rapid medical management of injuries and diseases</b>					
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>			
<i># of volunteers<sup>4</sup> mobilized in the response phase, providing direct services to people through the polio vaccination and surveillance</i>	1,100	1,900 <sup>5</sup>			
<i># volunteers and staffs<sup>6</sup> provided with PPE and immunization for protection from disease while responding</i>	1,200	1,900			
<b>Progress towards outcomes</b>					
<p>From 14 October 2019 to September 2020, PRC, in close coordination and collaboration with the DOH, and health partners (WHO and UNICEF) and the rural health units (RHU), completed three rounds and extended rounds of synchronized polio vaccination covering 852 communities in the National Capital Region, Region 3, Region 4A and the whole Mindanao areas. A total of 296,690 children aged 5 and under were vaccinated during the first three rounds and the extended rounds of vaccination.</p>					
<b>Activity</b>	<b>Date</b>	<b>Area</b>	<b>PRC Target</b>	<b>PRC Accomplishment</b>	
Round 1	14 to 27 Oct 2019	National Capital Region Mindanao selected areas (Davao City Davao del sur, Lanao del sur and Marawi City)	65,000	62,843	97%

<sup>4</sup> 1,000 for Polio vaccination and 100 for surveillance.

<sup>5</sup> At least 1,900, with 1,100 in Mindanao and 800 in NRC

<sup>6</sup> 1000 for Polio vaccination, 100 for Polio surveillance and 100 staff for surveillance for all the outbreaks.

Round 2	25 Nov to 7 Dec 2019	National Capital Region and all Mindanao areas	100,000	155,424	156%
Round 3	20 Jan to 2 Feb 2020	All Mindanao areas	60,000	105,417	176%
<b>Extended rounds of vaccination</b>					
Extended rounds for Mindanao	17 Feb to 1 Mar 2020	All Mindanao areas	80,000	147,284	184%
	23 Mar to 4 Apr 2020	All Mindanao areas	80,000	Postponed due to COVID-19 priority	
	20 Jul to 02 Aug 2020	All Mindanao areas	80,000	102,567	128%
Extended rounds for NCR	27 Jan to 7 Feb 2020	National Capital Region	80,000	114,617	143%
	24 Feb to 8 Mar 2020	National Capital Region	80,000	143,520	179%
Round 1	3 to 31 Aug 2020	Region 3 and 4A	40,000	31,880	80%
Round 2	14 to 27 Sept 2020	Region 3 and 4A	40,000	50,603	127%

The PRC, through its chapters and partners, mobilized 1,900 volunteers and staffs divided in teams of 4 members. For each rounds, volunteers were divided into teams of the following composition: (i) a team leader to lead the in the identification and localization of children eligible for vaccination and responsible for ensuring that the vials used are stored properly; (ii) a volunteer to record relevant information about children and guardians and ensure informed consent for the administration of the vaccine; (iii) a hygiene promoter/ health educator to provide information on vaccine administered and provide information on hygiene and sanitation; (iv) a vaccinator to administer the polio vaccine and ensure the availability and safety of the vaccine's. Vaccination teams ensure that eligible children receive and supplement their polio vaccine shots and that mothers have a good understanding of the vaccine; and receive adequate health and good hygiene messages.

Following Round 3, at the request of the government, PRC joined its DOH, WHO and UNICEF partners for the extended polio vaccination campaign, including additional vaccination rounds in Mindanao and NCR from February which lasted until September 2020. Originally, the plan was to conduct the extended round of vaccination between January to April 2020. However, as the government declared a National Emergency for the COVID-19 pandemic, with all ensuing measures restricting movement and activities, the activities of the polio campaign were suspended and health resources such as volunteers, staff and vehicles redirected to the COVID-19 emergency, until further notice.

As part of the preparation, volunteers were oriented on the Polio's transmission and prevention/ mitigation. They also received a vaccination team kit containing: (1) a vaccine carrier; (2) a first aid kit; (3) take-away cards containing information on polio and measures to prevent its transmission; (4) a set of gloves; (5) a mask; (6) reporting forms. The mobilized volunteers were also guided and trained by the DOH on vaccination procedures and protocols, with a focus on the proper disposal of used vials.

It is essential that this operation is COVID-19-safe for personnel and affected communities. Considering the current COVID-19 situation in the country, PRC needs to incorporate COVID-19 guidelines into its response protocols. PRC's staff are always requested to use appropriate personal protective equipment (PPE), swab test prior to leaving to the field and vehicles will be disinfected regularly. These measures will limit the risks of spreading the virus and protect those who are involved in the operation (staff, volunteers and relief item recipients).

PRC actively implemented the polio vaccination campaign during the COVID19 pandemic while observing the following infection prevention and control measures stated in the Social Mobilization Guidelines:

- All volunteers engaged in the vaccination team should have minimum PPE as follows, Mask, Gloves, and Face Shield, please note that other LGUs may not require gloves.
- Regularly practice hand hygiene/washing of hands. The vaccinator should strictly practice hand hygiene (hand washing or alcohol rub) before and after every vaccination.
- Health Screening.
- Disinfection Parameters.
- Orientation and training to all volunteers on COVID-19 preventive measures and provided with timely updates.
- Continue to disseminate key messages for COVID-19.

### **Output 1.3: Community-based disease prevention and health promotion is provided to the target population**

<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
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# people reached with community-based disease prevention and health promotion programming	300,000	1,483,450 <sup>7</sup>
# of volunteers <sup>8</sup> mobilized to support outbreak prevention and management activities in the communities	1,100	1,900

### Progress towards outcomes

The PRC has shared polio-related information<sup>9</sup> through: (i) the publication on social media of key information on polio, (ii) the dissemination of Information Education and Communication (IEC) materials in the community, (iii) public announcements in the community through mobile speakers, especially when inviting mothers/guardians to vaccinate their children. In addition, during vaccination, a hygiene promoter/ health educator ensures that mothers/parents received a takeaway card containing information on the polio vaccine, including the schedule for routine immunization. The team also provides information on hygiene and sanitation.

### Output 1.4: Epidemic prevention and control measures carried out

Indicators:	Target	Actual
# of people reached through direct social mobilization campaign and social media coverage	1,200,000	822,850 <sup>10</sup>
# volunteers continuously monitor the outbreak situations and report back to the OpCen for immediate response	100	1,900
# of children below 5 years of age, reached with vaccination for polio	100,000	296,690

### Progress towards outcomes

Thanks to its partnership with the DOH, the PRC was able to vaccinate a total of at least 296,690 children in NCR, Region 3, Region 4A and Mindanao. Visibility efforts was also conducted through social media to inform the public about the activities of PRC around polio, with total social media reach of 526,160. Volunteers conducted house-to-house visits and set-up vaccination stations in key areas such as shopping malls, seaports, and bus stations to ensure that no children will be left unvaccinated.

In addition to the vaccination activities, the team also conducted an information campaign on hygiene and sanitation and take-away cards were given to parents and/or guardians. Shared information included topics such as (i) what is polio? (ii) how can it be prevented? (iii) what to expect after vaccination? (iv) how to prevent the transmission of the virus? (v) when will the next vaccination take place? and (vi) how to contact the red cross for questions and concerns?

In order to inform the public about ongoing vaccination activities, each team uses a speaker with a pre-recorded message informing the community. The message includes information on measures to mitigate the spread of the polio virus and the importance of getting their child vaccinated – this method has proven effective as parents and guardians gets out of their homes upon hearing the message. In addition, a loudspeaker was mounted on a vehicle that goes around the city to inform the community about synchronized polio vaccination.



### Water, sanitation and hygiene

People reached: N/A

Male: N/A

Female: N/A

### Outcome 1: Immediate reduction in risk of waterborne and water related diseases in targeted communities

Indicator:	Target	Actual
# of people directly provided with safe water messages and services that meet agreed standards according to specific operational and programmatic context	300,000	Deprioritized

<sup>7</sup> Number of children vaccinated multiplied by their household members. (5 members per family)

<sup>8</sup> 1,000 for Polio vaccination and 100 for surveillance. Number of staff involved with polio operation is approximately 120.

<sup>9</sup> Material developed by PRC based on the DoH, WHO and UNICEF standards.

<sup>10</sup> Social media reach and number of people vaccinated.

<b>Output 1.1: Continuous assessment of water, sanitation and hygiene situation is carried out in targeted communities</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
# of assessments/monitoring visits undertaken for polio operation	2	Deprioritized
# of water samples from each chapter across 20 chapters collected and tested for 3 times, within the operation period to formulate a risk profile	10	Deprioritized
<b>Progress towards outcomes</b>		
<p>The majority of WASH activities (from Outcome 1: Outputs 1.1 and 1.5; and Outcome 2: Outputs 2.1 to 2.4) were planned for January 2020. However, due to the high number of disaster operation supported simultaneously by PRC and following the raise in Philippines of the COVID-19 alert system to code red sublevel 2 on 12 March 2020, activities under the emergency appeal were postponed until further notice, as recommended by DOH. Longer term WASH activities will be carried out once the operation resumes. Therefore, WASH activities were deprioritized.</p>		
<b>Output 1.4: Hygiene promotion activities which meet Sphere standards in terms of the identification and use of hygiene items provided to target population</b>		
<b>Indicator:</b>	<b>Target</b>	<b>Actual</b>
# volunteers involved in hygiene promotion activities	60	475
<b>Progress towards outcomes</b>		
<p>Although WASH activities were deprioritized, one member of each vaccination team was responsible for disseminating basic health and hygiene messages during the vaccination campaign. The key messages provided relate to personal hygiene and environmental sanitation.</p>		



### **Protection, Gender and Inclusion**

People reached: N/A

Male: N/A

Female: N/A

#### **Outcome 1: Communities identify the needs of the most vulnerable and particularly disadvantaged and marginalised groups, as a result of inequality, discrimination and other non-respect of their human rights and address their distinct needs**

<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
All people received Protection, Gender and Inclusion (PGI) services provided by PRC as part of the Public Health Emergencies operation by Dec 2020	Yes	Deprioritized
<b>Output 1.1: NS programmes improve equitable access to basic services, considering different needs based on gender and other diversity factors</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
PRC ensured improved equitable access to basic services, considering different needs based on gender and other diversity factors	Yes	Yes
# of staff and volunteers trained for PGI activities	100	Deprioritized
# of staff and volunteers mobilized to support PGI activities	100	Deprioritized
<b>Progress towards outcomes</b>		
<p>PGI related activities were deprioritised due to COVID-19 pandemic in country.</p>		
<b>Output 1.2: Emergency response operations prevent and respond to sexual- and gender-based violence and all forms of violence against children</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
# of staff and volunteers mobilized to support SGBV activities	100	Deprioritized
<b>Progress towards outcomes</b>		
<p>SGBC related activities were deprioritised due to COVID-19 pandemic in country.</p>		

<b>Output 1.3: National Society educational and advocacy programmes raise awareness on humanitarian challenges, cultivate humanitarian values and develop relevant interpersonal skills</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
100% of information, education and communication (IEC) and behaviour change communication (BCC) materials developed by and all training programs conducted by PRC, are compliant with the PGI minimum standards.	Yes	Yes
<b>Progress towards outcomes</b>		
<p>The PRC ensure that interventions are aligned with its own commitments, as well as those of the IFRC on minimum standard for protection, gender and inclusion (PGI) during emergencies. In particular, IFRC has zero tolerance for any form of violence against children especially since this operation is targeting children under five years. The child protection policy is part of the mandatory orientation provided to volunteers mobilized in this operation where all staff and volunteers signed a document that they have read, understood and would abide by the policy. Careful programming across all the sectors and operational areas of IFRC ensured that children were protected from exploitation and abuse regardless of their nationality, culture, ethnicity, gender, religious or political beliefs, socio-economic status, family or criminal background, physical or mental health or any other factors for discrimination.</p> <p>Indirectly, all people reached through this operation, benefited from various services that meet the IFRC minimum standards in terms of protection, gender and inclusion.</p>		

<b>Strengthen National Society</b>		
<b>Outcome 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>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<i># of PRC chapters that are well functioning and prepared to manage outbreaks and prevent epidemics</i>	25	25
<b>Output 1.1.4: National Societies have effective and motivated volunteers who are protected</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<i># of volunteers insured<sup>11</sup></i>	1,100	1,900
<i># of volunteers trained<sup>12</sup></i>	1,100	1,900
<b>Progress towards outcomes</b>		
<p>The PRC supported 25 chapters in NCR (Caloocan, Malabon, Manila, Marikina, Navotas, Pasay, Quezon City, Rizal and Valenzuela) and Mindanao (Agusan del Norte, Agusan del Sur, Bukidnon, Cotabato, Davao City, Davao del Norte, Davao del Sur, Davao Oriental, General Santos, Iligan City, Lanao del Sur, Sultan Kudarat, Sulu, Surigao del Norte, Tawi-Tawi and Zamboanga City). These chapters lead the overall response activity for the polio vaccination, with support from PRC NHQ.</p> <p>All volunteers received appropriate training prior to their mobilization. So far, at least 1,900 trained volunteers have been mobilized for the vaccination campaign in NCR and in Mindanao.</p> <p>Proper security orientation was provided to volunteers before going to different communities, especially in the Mindanao areas. All volunteers recruited and mobilized received orientation on the history and seven fundamental principles of the Red Cross Red Crescent Movement. All volunteers mobilized for this operation are insured under the Membership and Accident Assistance Benefit (MAAB) of PRC</p>		
<b>Output 1.1.6: National Societies have the necessary corporate infrastructure and systems in place</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<i># of PRC chapters equipped and supported to actively and efficiently participate in the polio prevention and management campaign</i>	25	25

<sup>11</sup> 1,000 for Polio and 100 for surveillance.

<sup>12</sup> 1,000 for Polio and 100 for surveillance.

# of staffs and chapter level regular volunteers from 25 chapters are equipped and trained to understand vaccine preventable diseases management activities and enhancing immunization	300	300
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### Progress towards outcomes

After the completion of the first two-rounds, the DOH recognized and commended the contribution of the PRC during the first two rounds of the “Sabayang Patak Kontra Polio” campaign, carried out in good coordination with their respective local health counterparts. PRC chapters, with their solid network of volunteers, were able to respond to DOH’s request and mobilize their teams to work in geographically isolated and disadvantaged areas (GIDA) in order to vaccinate more children.

In order to reach more children than those initially targeted, PRC chapters increased their targets and mobilized additional staff and volunteers in the areas allocated to them. PRC Health at NHQ ensured that all staff and volunteers were equipped with skills and knowledge on vaccine preventable diseases and vaccination through pre-round meetings, orientations and daily briefings. PRC also provided the 25 chapters with the following booklets and manuals as a guide and reference for current activities:

- PRC handbook for vaccination teams – this is a practical / ready-to-use document for vaccination teams to which they can refer as a guide on the vaccination activities, their roles and responsibilities.
- PRC orientation module for polio vaccination teams – a presentation to orient and prepare volunteers to be part of the vaccination teams.

From 10 to 11 January 2020, PRC organized a post-round Meeting and Planning workshop in Davao City. The activity aimed to bring together updates on accomplishments and lessons learned from the Mindanao chapters of the concluded polio vaccination that took place from 25 November to 7 December 2019. In addition, the chapters discussed their plans and targets for the next round of 20 January to 2 February 2020. Sixteen chapters (Zamboanga City, Agusan Del Sur, Gingoog City, Davao Del Norte, Davao Oriental, Davao del Sur, Davao City, General Santos – Sarangani, Sultan Kudarat, Cotabato, Agusan del Norte, Sulu and Tawi-Tawi) and representatives from WHO, DOH, UNICEF, ICRC and IFRC, participated to the activity.

On 22 January 2020, PRC organized a technical orientation and planning meeting for the NCR chapters, in preparation of the extended polio outbreak response. It aimed to orient the chapters on the two additional rounds of vaccination and technical considerations, as well as to set targets for each chapter.

On 8 February 2020, PRC conducted a technical orientation and planning meeting for the Mindanao chapters in preparation of the extended polio outbreak response. Seventeen chapters from Mindanao participated. An orientation session on COVID-19 was integrated during the meeting to update the chapters on the latest situation and key messages.

## International Disaster Response

### Outcome 2.1: Effective and coordinated international disaster response is ensured

Indicators:	Target	Actual
<i>Effective and coordinated international disaster response ensured</i>	Yes	Yes

### Output 2.1.1: Effective response preparedness and NS surge capacity mechanism is maintained

Indicators:	Target	Actual
<i># RDRT/ global surge support members deployed in the country for the Public Health in Emergencies (PHE) operations.</i>	3	4

### Progress towards outcomes

The PRC mobilized the NHQ and chapters’ existing staff, the Red Cross Action Teams (RCAT134) and the Red Cross 143 volunteers who are trained on WASH and Health to support the operation.

To support the PRC, the IFRC deployed four global surge support members including: (i) a member with expertise in community mobilization, health promotion, community surveillance and project management from November 2019 to early January 2020, (ii) a member with expertise in PMER, to support the operation from November 2019 to March 2020, (iii) an operations manager from November 2019 to March 2020, iv) and a member with information

management expertise in January 2020. The operations manager, IM and PMER also support the other ongoing DREF and emergency appeal operations.

### Output 2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved

Indicators:	Target	Actual
<i>% of target population satisfied with level of consultation, information and involvement in the operation</i>	80	Deprioritized
<i>% of target population satisfied with support received</i>	80	Deprioritized
<i>% of affected population with awareness of RCRC action in their community</i>	80	Deprioritized
<i>% of targeted population satisfied that they have access to information, feedback mechanisms and can influence the programme/response</i>	80	Deprioritized
<i># of staff/volunteers trained to provide clear information to communities during assessments</i>	100	2,020
<i>% of the overall beneficiaries joined the client satisfaction survey</i>	3	Deprioritized

### Progress towards outcomes

The Community engagement and accountability approach (CEA) has been integrated into programming to ensure that at-risk communities and affected people have direct access to information about the nature and scope of services provided by PRC and to ensure that they can participate and feedback to PRC.

To engage with the communities and provide vital information, the PRC had various initiatives and used different platforms:

- PRC and IFRC conducted informal assessments of the media landscape and preferred communication channels. Based on the CEA assessment for the CEA Implementation Guideline, it was found that most at-risk communities in urban and rural areas have wide access to mainstream platforms and social media. With extensive social media coverage across the country, PRC regularly uses Facebook and Twitter to raise awareness about vaccination and engage with communities most at-risk. More details on the social media reached can be found in SFI 3: Output 3.1.1.
- Volunteers visited communities to disseminate lifesaving messages and engage meaningful dialogues.
- Mobile loudspeakers were used to make public announcement of scheduled vaccination in communities and to encourage parents / guardians to vaccinate their children.
- IEC materials, with key polio messages, were printed and posted at different location in communities, allowing the public to see the information.
- Text messaging. Cards were provided to parents / guardians which contain PRC's contact details of the PRC for questions, clarifications or any form of feedback.

Generally, feedbacks are being resolved face to face during volunteer mobilization and through the mobile number provided. Most of the feedback were the following:

- Questions on the schedule of vaccination
- Appreciation to PRC vaccination teams
- Inquiry related to the age of child qualified for the polio vaccine
- Signs and symptoms of polio
- Next visit of vaccination teams for the next round

These activities aimed to support government efforts to increase the national immunization rate in addition to its ongoing national campaign against polio. Volunteers and staff were to provide clear information to communities during, pre and post workshops; they received guidelines and manuals, containing key messages and description of their duties and responsibilities. They also received daily briefings.

A client satisfaction survey was initially planned for the January 2020 synchronized vaccination round activity to help adjust programmes if necessary. However, the survey did not take place due to the high number of emergency operations supported simultaneously by PRC, which limited resources and led to prioritization. Currently, PRC is also responding to the COVID-19 pandemic situation in the country.

### Output 2.1.4: Supply chain and fleet services meet recognized quality and accountability standards

Indicators:	Target	Actual
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<i>Logistics department provides constant support to the National Society's logistics for replenishment and other procurements</i>	Yes	Yes
<b>Progress towards outcomes</b>		
<p>Logistics activities aim to effectively manage the supply chain, including procurement, fleet, storage and transportation to distribution sites in accordance with the requirements of the operation and aligned with IFRC's logistics standards, processes and procedures.</p> <p>For this operation, IFRC CO Logistics supports PRC with the following activities:</p> <ul style="list-style-type: none"> <li>• Rental of nine vehicles used when mobilizing volunteers during the polio vaccination.</li> <li>• Procurement of four cameras and a printer to support the operation.</li> <li>• Organization of hotel accommodation and food catering for each pre- and post-polio round meetings as well as during planning and technical orientation for staff and volunteers.</li> <li>• Support with printing manuals and forms used for polio vaccination.</li> </ul>		
<b>Output 2.1.6: Coordinating role of the IFRC within the international humanitarian system is enhanced</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<i>A coordinated and strategic response plan according to humanitarian minimum standards is adopted by actors in support of the government</i>	Yes	Yes
<b>Progress towards outcomes</b>		
<p>PRC supported by the IFRC ensures that all activities are in line with the national government plans, strategies and standards through regular information, planning and coordination meetings. More details as per progress reported under the previous <a href="#">six-months operations update</a>.</p>		

<b>Influence others as leading strategic partner</b>		
<b>Outcome S3.1: The IFRC secretariat, together with National Societies uses their unique position to influence decisions at local, national and international levels that affect the most vulnerable</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<i>IFRC and NS are visible, trusted and effective advocates on humanitarian issues</i>	Yes	Yes
<b>Output 3.1.1: IFRC and NS are visible, trusted and effective advocates on humanitarian issues</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<i>Communications plan is developed and implemented</i>	Yes	Yes
<i># of different communications materials produced (social media engagement, news articles, interviews, AV materials, etc.)</i>	8	61
<b>Progress towards outcomes</b>		
<p>No further update on this. Progress as reported under the <a href="#">six-months operations update</a>.</p>		
<b>Output S3.1.2: IFRC produces high-quality research and evaluation that informs advocacy, resource mobilization and programming</b>		
<b>Indicators:</b>	<b>Target</b>	<b>Actual</b>
<i>Two evaluations (one review and one final evaluation) of the response is undertaken and the findings are shared to a wider audience.</i>	2	1
<b>Progress towards outcomes</b>		
<p>Reporting on the operation has been carried out in accordance with the IFRC reporting standards. The operation team has technical PMER capacity and additional technical support provided through IFRC APRO PMER team.</p> <p>Post-round workshops have been held after each round in the National Capital Region (NCR) and Mindanao to take stock of the campaign, highlight lessons-learned and prepare next rounds. These workshops bring together chapters' administrators, representatives of the chapters' health services involved in the specific round, volunteer</p>		

team leaders involved in mass vaccination. Representatives from DOH, UNICEF, WHO, IFRC and academic partners also participate in the workshop.

## Effective, credible and accountable IFRC

### Outcome 4.1: The IFRC enhances its effectiveness, credibility and accountability

Indicators:	Target	Actual
<i>Effective performance of staff supported by HR procedures</i>	Yes	Yes

### Output 4.1.2: IFRC staff shows good level of engagement and performance

Indicators:	Target	Actual
<i>% of compliance with technical and managerial support as demanded by PRC</i>	100	100

#### Progress towards outcomes

IFRC Human Resources (HR) across the movement support PRC in achieving its goals for this project following compliance on PRC HR standards.

### Output S4.1.3: Financial resources are safeguarded; quality financial and administrative support is provided contributing to efficient operations and ensuring effective use of assets; timely quality financial reporting to stakeholders

Indicators:	Target	Actual
<i>% of financial reporting respecting the IFRC procedures</i>	100	100

#### Progress towards outcomes

For the IFRC Country Office, technical support has been provided to the National Society to ensure accountability and compliance with regards to the Appeal. The IFRC Finance team meets regularly with PRC Finance team to ensure 100 per cent compliance with standard operating procedures.

The IFRC, through the finance department, provides operational support for review, budget validation, bank transfers, and technical assistance to National Societies on procedures for justification of expenditures, including the review and validation of invoices. The PRC – which takes part of the working advance system – has been supported for many years by the IFRC and is accustomed to these financial procedures. All financial transactions in this operation adhere to the IFRC's standard financial procedures. The IFRC finance and administration team in Manila provides administrative and transport support at NHQ and in the field.

### Output S4.1.4: Staff security is prioritized in all IFRC activities

Indicators:	Target	Actual
<i>% operational staff for IFRC that received security briefing</i>	100	100

#### Progress towards outcomes

The IFRC security framework is applicable for this operation. With regards to PRC staff and volunteers, the National Society's security framework applies. Regular coordination is maintained with the ICRC and other Movement partners, as per existing security framework and Movement coordination agreement. Regular information-sharing has been maintained and specific security protocols for each security level.

In the country, PRC staff and volunteers were oriented about measles and polio and were given prevention measures that they should apply at home and on their respective communities. All staff and volunteers are required to complete the IFRC Stay Safe e-learning courses: Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security.

All staff and volunteers mobilized under this health emergency response were provided with personal protective equipment (PPE), to protect themselves against communicable diseases.

## D. BUDGET

The interim financial report is attached at the end of this 12-month report.

### Reference documents



Click here for:

- [Information bulletin \(polio\)](#)
- [Revised Emergency Appeal](#)
- [Revised Emergency Plan of Action \(EPoA\) \(polio\)](#)
- [Revised Emergency Plan of Action \(EPoA\) \(measles\)](#)
- [Previous appeals and updates](#)
- [Previous DREF and update](#)

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

#### In Philippine Red Cross

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#### For Performance and Accountability support (planning, monitoring, evaluation and reporting enquiries):

- Fadzli Saari, acting PMER manager; email: [fadzli.saari@ifrc.org](mailto:fadzli.saari@ifrc.org)

## 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 (NGOs) 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**.

# Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2019/9-2020/9	Operation	MDRPH032
Budget Timeframe	2019/2-2020/12	Budget	APPROVED

Prepared on 30 Nov 2020

All figures are in Swiss Francs (CHF)

## MDRPH032 - Philippines - Re-emergence of vaccine preventable

Operating Timeframe: 12 Feb 2019 to 31 Dec 2020; appeal launch date: 06 Mar 2019

### I. Emergency Appeal Funding Requirements

Thematic Area Code	Requirements CHF
AOF1 - Disaster risk reduction	0
AOF2 - Shelter	-30,000
AOF3 - Livelihoods and basic needs	0
AOF4 - Health	130,000
AOF5 - Water, sanitation and hygiene	300,000
AOF6 - Protection, Gender & Inclusion	20,000
AOF7 - Migration	0
SFI1 - Strengthen National Societies	-50,000
SFI2 - Effective international disaster management	330,000
SFI3 - Influence others as leading strategic partners	0
SFI4 - Ensure a strong IFRC	0
<b>Total Funding Requirements</b>	<b>700,000</b>
<b>Donor Response* as per 30 Nov 2020</b>	<b>840,524</b>
<b>Appeal Coverage</b>	<b>120.07%</b>

### II. IFRC Operating Budget Implementation

Thematic Area Code	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction	30,602	38,662	-8,060
AOF2 - Shelter	4,122	14	4,108
AOF3 - Livelihoods and basic needs	0	0	0
AOF4 - Health	989,328	713,955	275,373
AOF5 - Water, sanitation and hygiene	104,062	7,278	96,784
AOF6 - Protection, Gender & Inclusion	4,096	4,781	-685
AOF7 - Migration	0	0	0
SFI1 - Strengthen National Societies	8,473	-1,827	10,299
SFI2 - Effective international disaster management	9,283	6,554	2,729
SFI3 - Influence others as leading strategic partners	5,325	0	5,325
SFI4 - Ensure a strong IFRC	0	0	0
<b>Grand Total</b>	<b>1,155,290</b>	<b>769,417</b>	<b>385,873</b>

### III. Operating Movement & Closing Balance per 2020/09

Opening Balance	407,874
Income (includes outstanding DREF Loan per IV.)	522,871
Expenditure	-769,417
<b>Closing Balance</b>	<b>161,328</b>
Deferred Income	0
Funds Available	161,328

### IV. DREF Loan

* not included in Donor Response	Loan :	517,719	Reimbursed :	181,417	<b>Outstanding :</b>	<b>336,302</b>
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# Emergency Appeal

INTERIM FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2019/9-2020/9	Operation	MDRPH032
Budget Timeframe	2019/2-2020/12	Budget	APPROVED

Prepared on 30 Nov 2020

All figures are in Swiss Francs (CHF)

## MDRPH032 - Philippines - Re-emergence of vaccine preventable

Operating Timeframe: 12 Feb 2019 to 31 Dec 2020; appeal launch date: 06 Mar 2019

### V. Contributions by Donor and Other Income

Opening Balance							407,874
Income Type	Cash	InKind Goods	InKind Personnel	Other Income	TOTAL	Deferred Income	
British Red Cross	120,963				120,963		
DREF Allocations				336,302	336,302		
Finnish Red Cross	263				263		
The Canadian Red Cross Society (from Canadian Gov	65,343				65,343		
<b>Total Contributions and Other Income</b>	<b>186,569</b>	<b>0</b>	<b>0</b>	<b>336,302</b>	<b>522,871</b>	<b>0</b>	
<b>Total Income and Deferred Income</b>					<b>930,745</b>	<b>0</b>	