

DREF Plan of Action

St. Vincent and the Grenadines: Dengue Outbreak

DREF n° MDRVC004			
Date of issue: 2 November 2020		Expected timeframe: 3 months	
		Expected end date: 31 January 2021	
IFRC Category allocated to the of the disaster or crisis: Yellow			
DREF allocated: CHF 175,039			
Total number of people affected:	1,155 cases of dengue officially reported as of epidemiological week 41 ¹	Number of people to be directly assisted:	1,000 families (5,000 people)
Provinces affected:	All health districts, but most cases have been reported as occurring in persons who live in the St Georges, Charlotte, and St Andrews Parishes.	Provinces/Regions targeted:	Parish Charlotte (Georgetown, Mespotamia), Parish George (Calliaqua, Kingstown) and Parish Saint David (Spring Village, Chateaubeliar).
Host National Society(ies) presence (n° of volunteers, staff, branches): Saint Vincent and Grenadines Red Cross (SVGRC) has 424 volunteers, one headquarters and 10 full-time staff.			
Red Cross Red Crescent Movement partners actively involved in the operation: The International Federation of the Red Cross and Red Crescent Societies (IFRC) - Americas Regional Office (ARO) Country Cluster Support Team (CCST) - Port of Spain (POS); French Red Cross / Regional Intervention Platform for the Americas and the Caribbean (PIRAC).			
Other partner organizations actively involved in the operation: Ministry of Public Health Wellness and the Environment, Ministry of Education.			

[<Click here for the DREF budget and here for the contact information >](#)

A. Situation analysis

Description of the disaster

In its latest official bulletin dated 20 October 2020, the Ministry of Health, Wellness and the Environment has confirmed an increase in reported cases of dengue infection in the country with 1,155 laboratory confirmed cases of dengue fever recorded and six fatalities. The Hospital Services Programme and the Community Health Services Programme of the Ministry of Health, Wellness and the Environment continue to report increased patients presenting with symptoms consistent with Dengue fever. The last experience in the Saint Vincent and the Grenadines (SVG) islands was in 2012 when 200 cases were reported.

This increase in the number of cases is a clear indicator of a larger imminent outbreak on the island. As such, it is necessary to reduce the number of cases shortly.

The direct and indirect costs of dengue illness and vector control programs represent a substantial economic burden on both the health sector and the overall economy of SVG. This at a time when the Small Island Developing State is being significantly impacted by the current COVID-19 global pandemic.

¹ [Ministry of Health, Wellness and the Environment. DENGUE OUTBREAK – UPDATE 20/10/2020](#)

Children under 15 years old remain most affected (Table 1), with approximately 55% of laboratory confirmed cases falling in this age group.

Table 1 Table showing dengue infections by age group in St. Vincent and the Grenadines, EW 1-40, 2020

Age group	No. of Cases	Total Pop.	Attack Rate (%)	Lab-Confirmed Cases (%)
0-4	165	8763	1.9%	14%
5-14	474	18533	2.6%	41%
15-24	196	18774	1.0%	17%
25-34	96	16402	0.6%	8%
35-44	65	14913	0.4%	6%
45-54	44	14210	0.3%	4%
55-64	42	8976	0.5%	4%
65-74	33	5451	0.6%	3%
75-84	17	3467	0.5%	1%
85+	5	1206	0.4%	0%
Unknown	18	0		2%
Total	1155	110695	8.8%	100%

Source: Ministry of Health, Wellness and the Environment St. Vincent and the Grenadines: Memorandum

St. Vincent and the Grenadines is currently experiencing the most severe dengue fever outbreak in its recent history. The mosquito borne disease continues to affect all health districts, but most reported cases have been reported in the Pembroke, Kingstown, Calliaqua and Georgetown Health Districts (Table 2).

Table 2 Table showing dengue infections by Health Districts in St. Vincent and the Grenadines, EW 1-41, 2020

Health District	No. Of Cases	Percentage	Rank
Calliaqua	167	14.5%	3
Cedars	58	5.0%	7
Chateaubelair	75	6.5%	5
Georgetown	124	10.7%	4
Kingstown	246	21.3%	2
Marriagua	65	5.6%	6
Pembroke	291	25.2%	1
Northern Grenadines	36	3.1%	8
Southern Grenadines	19	1.6%	9
Unknown	74	6.4%	
Total	1155	100.00 %	

Source: Ministry of Health, Wellness and the Environment St. Vincent and the Grenadines: Memorandum

Since the 2012 outbreak, the government has upgraded its surveillance and control system although it is understood that activities to control dengue both locally and regionally have been only moderately effective as vector control programs are costly and difficult to sustain. Additionally, given the COVID-19 context in country, it is feared that this dengue outbreak could expand considerably without appropriate and timely intervention.

Summary of the current response

Overview of Host National Society Response Action

The Saint Vincent and the Grenadines Red Cross Society (SVGRCS) has previous experience in responding to dengue outbreaks including the most recent dengue outbreak in 2012. The National Society was also involved in the emergency response to the Zika epidemic (between 2015 and 2019) which is similarly transmitted by the *Aedes Aegypti* mosquito.

In front of this current public health situation, the SVGRCS has received a request from the Director of the Ministry of Health Wellness and the Environment to assist the health response field teams and to work closely with the national office of the Public Health Department as the lead coordinator in this response.

Thus, since the end of September, the SVGRCS has assisted the Ministry in the following activities:

- Provision of transportation for Governmental fogging team,
- Provision of volunteers to assist fogging teams with the dissemination of information,
- Inspection of premises as part of routine mosquito control programme,
- Production and distribution of educational information,
- Donation of medical needles used for drawing blood for testing.

The SVGRCS is also doing public awareness sensitization and mosquitos nets distribution for volunteers and schools. The SVGRCS has published an initial GO Report to the GO platform on the 5th October 2020 outlining the current epidemiological situation and activities taking place within the NS. A second GO report was published on the GO Platform Tuesday 20 October 2020.

Overview of Red Cross Red Crescent Movement Actions in country

The IFRC Americas Regional Office (ARO) is not directly represented in Saint Vincent and the Grenadines but through its Country Cluster Support Team (CCST) office based in Trinidad and Tobago. The CCST is closely supporting the NS. In the past, it has also supported the SVGRCS with the implementation of health project linked with Zika virus and vector control activities in approximately 25 communities.

The Regional Intervention Platform for the Americas and the Caribbean (PIRAC) of the French Red Cross is supporting closely the SVGRCS through several disaster and crisis preparedness projects. In particular, the PIRAC is carrying out a project dedicated to support SVGRCS to stockpile emergency Non-Food Items (1700 long-lasting insecticidal nets, etc.) and to train NS teams in emergency response logistic and distribution. The PIRAC also support SVGRC in its COVID19 response activities (PPE supply, public awareness, food, and hygiene distribution, etc.)

IFRC and PIRAC are supporting the planning of the response and development of the emergency plan of action (EPoA) for dengue fever outbreak in support of the National Society. Per agreement between the IFRC and the French Red Cross, the PIRAC support to the Caribbean National Societies during disasters and crisis, within IFRC Regional Response Disaster and Crisis management system, coordinated and led by the IFRC.

IFRC has been supporting the NS trough the Community Engagement and Accountability and the Communications Officers to develop the following activities:

Social media Risk Communications:

Development of graphics - 8 of them to be shared on social media or made into posters
Working on other public service announcements (public service announcement - PSAs)

Protect yourself from mosquito bites

Wear light coloured clothing with long sleeves and long pants to prevent mosquito bites.



#StopDengue



Eliminate mosquito breeding sites and keep your surroundings clean

Regularly remove stagnant water from around your home and remove items that can gather water by getting rid of garbage.

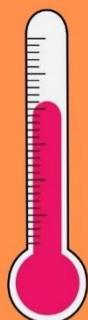


#StopDengue



Get health care if you have symptoms

Do not self-medicate! Visit a healthcare facility, if you show signs and symptoms:



- Fever
- Headache
- Muscle and joint pain
- Skin rash
- Nausea or vomiting

#StopDengue



Protect yourself from mosquito bites

Regularly use insect repellent during the day, dawn, and dusk when mosquitoes are most likely to bite.



#StopDengue



Public Communications:

Wrote a release draft for the NS to use in their own country
Created Key messages if there are any questions
Sharing work of the SVG Red Cross on Twitter and Facebook

Social media posts:

<https://twitter.com/CADRIMCOE/status/1317169233965457408>
<https://twitter.com/CADRIMCOE/status/1317853271613001738>
<https://twitter.com/CADRIMCOE/status/1318580077311897602>
<https://www.facebook.com/CADRIM.IFRC/posts/3313967788658475>

Overview of other actors' actions in country

At the national level, the emergency is being coordinated by the Ministry of Health Wellness and the Environment.

The Ministry of Health is conducting epidemiological surveillance and case detection and treatment through its network of hospitals and health centres and has been undertaking a communications campaign to prevent dengue fever. It also took action to ask stakeholders to support clean up campaigns to eradicate the vector and schools were rapidly asked to change clothing to protect children.

The Vector Control Unit (VCU) of the Environmental Health Department of the Ministry of Health, Wellness and the Environment working with the Ministry of Agriculture and NGOs, continues to implement source reduction strategies, including increased fogging. Health promotion activities, also part of the Integrated Vector Control Strategy, are ongoing with the engagement of communities, churches, and other non-governmental organizations.

Needs analysis, targeting, scenario planning and risk assessment

Needs analysis

At the end of epidemiological week 41, there were 1,155 cases of Dengue, distributed mainly over Pembroke, Kingstown, Calliaqua and Georgetown Health Districts. This current number of dengue cases highly surpasses previous years, and it is expected that the number will continue to rise and possibly spread with the ongoing hurricane rainy season.

The health situation in those dengue-affected provinces is worrying given that the incidence rate is much greater than in the 2012 epidemic and moreover there are, at this specific time, several social determinants that increase the risk of higher dengue incidence:

- The ongoing COVID-19 pandemic which affects the country and the various actors in the fight against the Dengue epidemic by limiting their movements but also limiting the purchases of PPE.
- The ongoing active rainy season until end of November (official hurricane season from 1 June to 30 November) which increases stagnant water and mosquitos breeding sites multiplication.
- Issues in safe water supply delivered which forces people to store water in containers increasing the risk of mosquitos breeding sites.
- Communities have poor knowledge about dengue prevention and a low perception of the risk.

According to the current context, the main actions to undertake should focus on:

- Early identification of signs in patients, and medical assistance to avoid deaths.
- Public awareness campaign to engage the entire population to play a role in cleaning up larvae breeding sites and early detection of signs and symptoms.
- Preventive education in schools targeting the school children and staff, with potential reach with the same prevention messages to their families.
- Campaign to identify and eliminate larvae breeding sites, targeting residential and workplace.

Targeting

Given this situation, SVGRCS decided to focus its work on complementing Ministry of Health Wellness and the Environment activities at the community level. Provinces to be targeted by the operation will be selected in coordination with the Ministry of Health, Wellness, and the Environment.

While the implemented activities will see to the benefit of the entire population (particularly in risk communication), on the mainland, efforts will be concentrated in Parish Charlotte (Georgetown, Mespotamia), Parish George (Calliaqua, Kingstown) and Parish Saint David (Spring Village, Chateaubeliar). These are parishes that have the highest incidence of cases at the national level and high risk of seeing an increase in dengue cases in the coming weeks due to the presence of negative social determinants such as poverty and unemployment and high population density.

Prevention measures activities will also encompass the Northern and Southern Grenadines (Bequia, Canounan, Union Island). The Grenadines are particularly vulnerable as water harvesting systems, water holes and swampy areas promote vector breeding grounds. In addition, as a multi-island state, resources from the mainland often do not reach the Grenadines or are in much shorter supply.

Activities will be carried out in coordination with the Ministry of Health, Wellness, and the Environment in order to contribute to the national dengue outbreak response strategy led by this government institution, which will allow optimal use of available resources.

SVGRCS intends to work with 1,000 families through this DREF and its Plan of Action is intended to target most vulnerable communities based on the following vulnerability criteria:

At the national level:

- High population density
- Incidence of suspected dengue cases

- Populations with greater distribution of older adults and children
- Presence of schools

At the community level:

- Families in communities with a high incidence of dengue cases.
- Limited preventive actions by the authorities.
- Communities with a low socio-economic level.
- People in vulnerable situations: single parent households, older adults, children and people with disabilities.
- Families with children under the age of 15.
- Families with infants sleeping during the day
- Families where member get sick and is necessary to implement contentions to avoid the spread
- Basic community organization

At the educational centres level:

- Schools located in areas with a high incidence of dengue cases.
- Low community organization.
- Limited preventive measures at the educational level.

Scenario planning

Three scenarios are possible, which will depend on the implementation of vector control activities, community mobilization and strengthening of activities being conducted by the Ministry of Health, Wellness and the Environment

Scenario	Humanitarian consequence	Potential Response
Scenario A Best Case Scenario	<ul style="list-style-type: none"> • Low number of Dengue cases. The government is able to address the outbreak with local resources. 	<ul style="list-style-type: none"> • Health promotion, dengue prevention and vector control activities are successfully carried out in at risk communities in coordination with the Ministry of Health Wellness and Environment and cases are stabilized and start to decrease • Communities are sensitised to initiating vector control activities and cases start to decrease • Breteau* index falls in at-risk communities • Sensitized communities identify early signs and symptoms of severe dengue and take preventive measures
Scenario B Likely scenario	A low number of Dengue cases. The government can address the outbreak with local resources.	<ul style="list-style-type: none"> • Isolated health promotion, dengue prevention and vector control activities at the community level take place and there is a continuous increase of cases • Breteau² index remains the same/increases in at-risk communities • Some communities have no perception of risk regarding the dengue outbreak and cases continue to increase • Increased incidence of dengue cases Saturation of hospitalization services in Covid19 pandemic time.
Scenario C Worst case scenario	<ul style="list-style-type: none"> • A moderate number of Dengue cases. The government can address the outbreak but needs extra support. 	<ul style="list-style-type: none"> • Few health promotion and dengue prevention activities at the community level and cases increase drastically

² Breteau index measures the number of water containers containing the vector, per 100 houses inspected.

		<ul style="list-style-type: none"> • Population has no perception of risk regarding the dengue outbreak and cases increase • Increase in the number of severe dengue cases and related deaths • Collapse of emergency and hospitalization services in Ministry of Health hospitals <p>Increase in the number of deaths</p>
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Operation Risk Assessment

The operation faces some risk factors including deploying trained volunteers to the hotspot's areas might pose a risk of contracting the dengue virus during exposure. This risk will be mitigated through the provision of Personal Protective Equipment to all volunteers working in the field. The current hurricane season may also interfere with the implementation phase of the response operation.

While travel restrictions are not as onerous as other Caribbean territories travel to St. Vincent and the Grenadines (SVG) is available. However, the Government has instituted some protective measures for incoming persons. These include being in possession of Negative Covid 19 result before travel to the country. As an additional measure persons entering SVG will be required to be quarantined in a state advised Hotel for five (5) days where you be tested again and post this test you will have an additional ten (10) day quarantine at your home if a resident and for non-resident the hotel of you stay.

COVID-19 Pandemic

This DREF operation and its operational strategy considers the risks related to the current COVID-19 pandemic and is aligned with the IFRC global emergency appeal that supports National Societies to deliver assistance and support to communities affected or at risk of being affected by the COVID-19 pandemic. As of 2 November, a total of 4 active cases of COVID-19 have been registered in country, with 71 recoveries according to the MoH.³

National Society responses to COVID-19 are supported through the [IFRC global appeal](#), which is facilitating and supporting them to maintain critical service provision, while adapting to COVID-19. This DREF operation is aligned with and will contribute to the current global strategy and regional Emergency Plan of Action for COVID-19 developed by the IFRC Americas Regional Office, in coordination with global and regional partners. This means that the NS will ensure, even as it responds to the current dengue outbreak, COVID-19 prevention measures are adhered to, in line with regional plan of action and its national COVID-19 country plan.

IFRC continues to assess how emergency operations in response to disasters and crisis should adapt to this crisis and provide necessary guidance to its membership on the same. The NS will keep monitoring the situation closely and revise the plan accordingly if needed, taking into consideration the evolving COVID19 situation and the operational risks that might develop, including operational challenges related to access to the affected population, availability of items, procurement issues, and movement of NS volunteers and staff. For more information please consult the Covid-19 operation page on the [IFRC Go platform](#).

B. Operational strategy

Overall Operational objective:

Reducing the immediate risk of spread of the dengue fever virus for 1,000 families (5,000 people) in the most affected areas in St. Vincent and the Grenadines islands.

Proposed Strategy:

The SVGRCS will work directly with communities and in coordination with local authorities and the Ministry of Health Wellness and Environment. SVGRCS will prioritize its actions within the affected areas listed above.

³ [Ministry of Health, Wellness and the Environment. COVID-19 Report As at November 2nd, 2020.](#)

The following actions are proposed within the Plan of Action:

- Promotion of prevention and vector eradication
 - Community mapping and awareness campaign in affected and at-risk areas using the IFRC/Red Cross Red Crescent Climate Centre (RCCC) Zika Dengue Chikungunya (ZDC) Toolkit for Communities and Schools
 - <https://www.ifrc.org/Global/Documents/Secretariat/Health/ZDC-Toolkit-Prevention-Toolkit.pdf>
 - <https://www.zikacommunicationnetwork.org/resources/zika-dengue-and-chikungunya-prevention-toolkit>
 - Long- lasting insecticide nets (3000) distribution in affected schools/childcare centres and for the elderly (including retirement homes) sleeping during daytime.
 - Distribution of mosquito repellents (3000).
- Mass communications campaign
 - Using social media, local press, and radio to increase awareness on prevention strategies.
 - Neighbourhood awareness sensitization during Government fogging campaign
- Waste disposal campaign
 - Community clean-up campaigns and mosquito breeds site destruction.
 - Distribution of cleaning kits (gloves, wheelbarrows, hammers, ladders, spades, hoes, rakes and bags) for 9 events
 - Drumproofing to communities and schools.

An initial assessment will be undertaken to determine the level of need on communities. The response strategy will start with actions to train Red Cross volunteers and community health promoters in the facilitation of community mapping, awareness campaigns and behavioural change communications (utilizing the IFRC/RCCC ZDC Toolkit) regarding actions to prevent and eradicate the vector.

A team of volunteers from each targeted area along with the volunteer field coordinator will be trained in the facilitation of community awareness and operational safety. This training is being facilitated by the Ministry of Health for new and previously trained personnel. Volunteers will be deployed to communities to undertake awareness and coordinate the clean-up campaign in communities, schools and public centres. An initial community-wide clean-up campaigns will be facilitated in each community, after which SVGRCS volunteers will visit communities to encourage continued community-led clean-up activities.

A mass media campaign will be undertaken through print, radio and social media and will aim to reach persons nationwide in both the targeted areas and other affected areas with awareness on the prevention of dengue. It will be strategic to work with groups recognized within the communities to ensure sustainability of actions once Red Cross interventions are over. Meetings will be promoted between local authorities and community leaders to review progress of the actions and coordination of joint work.

The SVGRCS proposed strategy involves close collaboration with the Ministry of Health to ensure a coordinated and cohesive prevention campaign.

In order to adequately support this operation, staff for Monitoring and Evaluation, Finance and a Project Manager will be hired for its duration.

Gender, protection, and inclusion principles will be incorporated into activities through encouraging the involvement of female volunteers, women's participation in community activities and monitoring through focus group activities with women and other vulnerable groups.

Operational support:

Planning, monitoring, evaluation, and reporting

Reporting on the operation will be conducted in accordance with the IFRC's minimum reporting standards. A final report will be issued within three months of the operation's completion.

Administration and Finance

St. Vincent and the Grenadines Red Cross will assign a specific administrator as quickly as possible to manage the operation. The IFRC has also assigned a dedicated Project Manager with base in Trinidad and Tobago to support the National Society.

IFRC provides the necessary operational support for budget review and validation and bank transfers, as well as technical assistance to National Societies on expense justification procedures including invoice review and validation.

Human Resources

The DREF operation will hire:

- One Project Officer, for three months
- One PMER Officer, for three months
- One Finance Officer, for three months
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The St. Vincent and the Grenadines Red Cross will make available to the operation:

- 100 volunteers in targeted areas.

One Rapid Response Personnel could be deployed for three months to assist St. Vincent and the Grenadines Red Cross with executing, monitoring, and reporting of operation activities.

Security

St. Vincent and the Grenadines Red Cross volunteers have been trained in basic safety standards (based on the Stay Safe manual). They will have the necessary visibility material (uniforms according to SLRC regulations) and will be provided accident insurance made available by the Movement.

Personnel conducting vector control activities will also be provided personal protection equipment and will use chemical substances in compliance with Ministry of Public Health regulations.

Logistics and Supply Chain

The operation includes international purchases of Long-Lasting Insecticidal Nets, cleaning kits, and repellents, coordinated with the IFRC Regional Logistics Unit in Panama. Major procurement processes will be managed at the national level by the IFRC to support the St Vincent and Grenadines Cross. Purchases will comply with standard IFRC procedures.

Budget

See [Annex](#) for the budget.

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

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How we work

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



DREF OPERATION

MDRVC004 - St. Vincent and the Grenadines: Dengue Outbreak

2/11/2020

Budget by Resource

Budget Group	Budget
Clothing & Textiles	9,000
Water, Sanitation & Hygiene	83,400
Medical & First Aid	3,000
Teaching Materials	12,700
Relief items, Construction, Supplies	108,100
Distribution & Monitoring	11,000
Transport & Vehicles Costs	11,620
Logistics Services	6,000
Logistics, Transport & Storage	28,620
National Society Staff	11,400
Volunteers	3,150
Personnel	14,550
Workshops & Training	2,486
Workshops & Training	2,486
Travel	3,000
Information & Public Relations	6,000
Communications	300
Financial Charges	1,300
General Expenditure	10,600
DIRECT COSTS	164,356
INDIRECT COSTS	10,683
TOTAL BUDGET	175,039

Budget by Area of Intervention

AOF1	Disaster Risk Reduction	
AOF2	Shelter	
AOF3	Livelihoods and Basic Needs	
AOF4	Health	141,539
AOF5	Water, Sanitation and Hygiene	
AOF6	Protection, Gender and Inclusion	
AOF7	Migration	
SFI1	Strengthen National Societies	1,598
SFI2	Effective International Disaster Management	3,195
SFI3	Influence others as leading strategic partners	28,708
SFI4	Ensure a strong IFRC	
TOTAL		175,039

