

Final Report

Philippines: Mindanao Returnees

DREF operation	Operation n° MDRPH040
Date of issue: 29 April 2021	GLIDE n° OT-2020-000169-PHL
Operation start date: 18 July 2020	Operation end date: 31 January 2021
Host National Society: Philippine Red Cross	Operational Budget (CHF): 112,984
Number of people affected: 5,300	Number of people assisted: 2,119
Red Cross Red Crescent Movement partners currently actively involved in the operation: PRC is working with the International Federation of Red Cross and Red Crescent Societies (IFRC) in this operation. The National Society has also been supported by the International Committee of the Red Cross (ICRC).	
Other partner organizations actively involved in the operation: The government departments involved includes the Department of Social Welfare and Development (DSWD), Department of Foreign Affairs (DFA), Department of Health (DOH), Department of Labour and Employment (DOLE), the Overseas Workers Welfare Administration (OWWA), and the Bureau of Quarantine.	

A. SITUATION ANALYSIS

Description of the disaster

Since the 1970s, migrants from Mindanao have migrated to Sabah fleeing conflict and economic deprivation. Subsequent large-scale returns and deportations from Sabah, in response to the policies of Malaysian authorities, have been continuous for several decades. A large-scale movement of people from Sabah, Malaysia, to the Philippines recommenced on 30 June 2020 through which 5,300 Filipinos were expected to return in groups of up to 400 people in 15-day intervals. The first group of 395 people arrived by sea on 18 July 2020. Zamboanga City, where a PRC Chapter was present, served as a processing area for the returning Filipinos from Sabah (REFS). Returnees were tested for COVID-19 in Malaysia pre-departure and underwent quarantine upon their arrival to the Philippines. Quarantine was conducted in either Zamboanga City or in the returnee's home provinces. The Returnees had been in detention in Sabah for between six to 12 months pre-return.

The total number of arrivals into the Philippines included in this operation was 2,119 individuals with batches of returnees arriving in the Philippines as follows:

- 18 July 2020 - arrival of batch #1 with 395 individuals.
- 29 July 2020 - arrival of batch #2 with 394 individuals.
- 13 August 2020 - arrival of batch #3 with 400 individuals.
- 28 August 2020 - arrival of batch #4 with 379 individuals.
- 25 September 2020 - arrival of batch #5 with 400 individuals.
- 12 November 2020 – arrival of batch #6 with 151 individuals.

There was a pause of arrivals between 12 November 2020 until March 2021, with the arrival process reestablished after this date. The pause was due to the cancellation of the scheduled deportation due to the rising cases of COVID-19 in Sabah, Malaysia.

The returnees were comprised of men, women and children, and while some were initially in family groups, many returned individually. Disaggregated data was collected and summarized in the following table.

Date	Total returnees	No. of returnees arrived									
		Elderly (61 years & above)		Adult (19-60 years)		Adolescent (12-18 years)		Child (1-11 years)		Infant (0-11 months)	
		M	F	M	F	M	F	M	F	M	F
18 July 2020	395	6	0	303	42	16	9	13	5	1	0
29 July 2020	394	3	0	288	53	24	5	12	8	1	0
13 August 2020	400	7	0	285	71	10	9	7	7	1	3
28 August 2020	379	2	0	291	46	12	17	0	8	0	3
25 September 2020	400	7	1	307	42	15	11	9	7	1	0
12 November 2020	151	0	1	104	11	6	5	11	13	0	0
Total	2,119	25	2	1,578	265	83	56	52	48	4	6

Since 1970s, migrants from Mindanao have migrated to Sabah fleeing conflict and economic deprivation. Many of the returnees have resided in Sabah for many years or born in Sabah and had established lives and families in Malaysia. Some of the returnees no longer speak the language/s of Mindanao. The main driver of the migration from Mindanao is the perception of better livelihood options in Sabah, together with security concerns in some parts of Mindanao that have further challenged peoples' livelihoods.

While the process of returning Filipinos from Sabah has been ongoing for several years, this action is of concern due to the large number of returnees in a short period of time and in the context of the COVID-19 pandemic. The pandemic and associated quarantine measures and travel restrictions interrupted the routine repatriation process. They also required the Filipino returnees to remain in detention facilities in Malaysia. The COVID-19 pandemic and the requirement for quarantine mean the Malaysian and Philippine authorities agreed that only Filipinos with a family connection in Mindanao would be part of the repatriation, and people with no remaining family/kinship connections in the Philippines would remain in Malaysia through the COVID-19 pandemic period. The presence of COVID-19 in Sabah highlighted the need for supporting a carefully managed repatriation process.



Returnees disembarking ferry after voyage from Sabah, Malaysia to Zamboanga City, Philippines. (Photo: PRC)

The Philippine government formed a taskforce to oversee the repatriation and the Department of Health, Department of Social Welfare and Development, the Overseas Workers Welfare Administration, and the Bureau of Quarantine served as lead agencies of the inter-agency group. The Philippine government required all returning Filipinos to undergo COVID-19 testing and a 14-day quarantine to control the local transmission of the virus, and the return of groups of people in 15-day intervals reflects this protocol.

Based on assessments conducted through key informant interviews with returnees who had arrived, their immediate needs included food, essential household items (blankets and sleeping mats), WASH (jerry cans, hygiene kits, and hand-washing facilities), health inputs (mosquito nets, IECs, first aid and psychosocial support services) including psychological first aid and Restoring Family Links services.

In April 2017 IFRC launched a DREF for CHF 72,088 to support the PRC in assisting Filipino returnees from Sabah, Malaysia. The sinking of a vessel that previously transported the returnees prompted suspension of repatriations in September 2016, which led to a backlog of approximately 7,000 undocumented Filipino migrants in Sabah, and a rapid increase in returns when transport was again available. The DREF supported 4,446 Filipino returnees from Sabah with essential household items and welfare services. As PRC chapters had no previous experience working with migrant issues such as the Sabah returnees, PRC with IFRC developed a training manual to guide staff and volunteers about roles and responsibilities for responding to migration and displacement issues, followed by national and chapter level training with staff and volunteers. Since then, PRC chapters in Mindanao continued engaging with returnees with basic services through their chapter budgets.

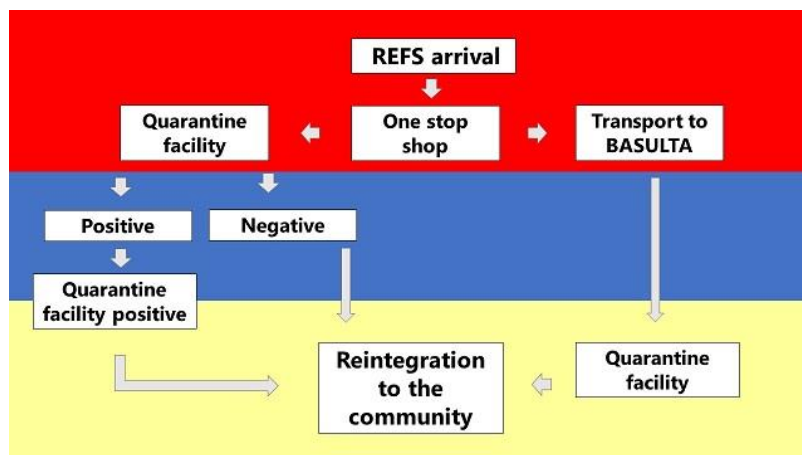
Summary of response

Overview of host National Society

The Philippine Red Cross (PRC) provided services to support returnees by improving their health, safety and welfare, complementing the assistance provided by the public authorities. The support by PRC is being provided on a one-off basis in view of the scale of returnees' needs, which includes safeguards against COVID-19. PRC chapters who are involved in the operations are from Zamboanga, Basilan, Sulu and Tawi-Tawi (ZAMBASULTA).

Upon the arrival of the first group of 395 returnees from Sabah on 18 July 2020, PRC Chapters in Zamboanga, Sulu and Tawi-Tawi in Bangsamoro Autonomous Region in Muslim Mindanao (BARMM) Region mobilized its Red Cross 143 (RC143, – community-based volunteer teams comprising of 1 leader and 43 members). The sea voyages, to relocate the returnees to the Philippines, have been conducted in batches of up to 400 persons per voyage with 15-day intervals between. The PRC plans to continue this support with each return group until all 5,300 returning Filipinos have cleared quarantine.

The returnees arrived at the International Sea Port of Zamboanga and were directly processed at the One-Stop Processing Service headed by the Office of the Civil Defense. After the assessment and processing of the REFS, individuals bound to Basilan, Sulu, and Tawi-tawi were immediately transferred to another sea vessel to transport them back to their localities while individuals bound to Zamboanga City, Zamboanga Peninsula, and other nearby provinces of BARMM undertook a 14-day quarantine in a designated facility before proceeding to their respective destinations.



Based on the process illustrated, there were three layers of the response that PRC considered in each phase. This process is what assisted the team to identifying what activities to include in respective areas:

1. Red tier– these were the initial activities and provisions from team upon the arrival of the REFS.
2. Blue tier – these were the follow-up activities inside the quarantine facilities.
3. Yellow tier – these were the activities for the social reintegration of REFS.

Breakdown of PRC activities per tier

Level of Response	Duration	Activities/Interventions	Concerned PRC Services
Tier 1: Initial Response	1 day	<ul style="list-style-type: none"> • Provision of food • Provision of IEC materials on PSS, RFL, WASH, and Health • Profiling of REFS • Provision of sim cards/mobile credit • Disinfection activity to the returnees • PRC chapter Emergency Medical Team (EMT) are on-stand by, if required • Psychological First Aid 	<ul style="list-style-type: none"> • Welfare • Health • WASH • Safety
Tier 2: Follow-up Activities	14 days	<ul style="list-style-type: none"> • Establishment of Helpline • Monitoring of the situation • Promotional videos about health and hygiene promotion played inside the quarantine facilities 	<ul style="list-style-type: none"> • Welfare
Tier 3: Social Reintegration Activities	Day 14 onwards	<ul style="list-style-type: none"> • Establishment of Humanitarian Service Points/ Welfare Desk, Hygiene promotion <p>Community</p> <ul style="list-style-type: none"> • Orientation on risk communication and community engagement • community-based psychosocial support 	<ul style="list-style-type: none"> • Welfare • Safety • WASH • Health • DMS

Revisions were made to emergency plan of action. A two-month extension of the operation was approved, extending the operation out to 31 January 2021. The rationale for the extension was the tightening of movement restrictions due to COVID-19 that caused delays in the scheduled repatriation process from Sabah, Malaysia to Philippines. Specifically, activities planned under the operation such as delivery and distribution of hygiene kits, jerry cans and sleeping kits were delayed due to the restrictions.

There were no recorded arrivals after 12 November 2020, until March 2021, due to the cancellation of the scheduled deportation due to the rising cases of COVID-19 in Sabah, Malaysia. The Local Government will continue the repatriation process until all 5,300 returnees are repatriated back to the Philippines.

Overview of Red Cross Red Crescent Movement in country

The PRC lead the overall response operation. PRC maintained close coordination with in-country Movement partners and continues to provide updates. In addition to the IFRC, the International Committee of the Red Cross (ICRC) and Movement partners are present in the country, including American Red Cross, Canadian Red Cross, German Red Cross, Finnish Red Cross, Japanese Red Cross Society, Netherlands Red Cross, Spanish Red Cross and Qatar Red Crescent Society.

The ICRC provided financial assistance to PRC’s COVID-19 response and these funds were mobilized in support of Sabah returnees including hygiene kits (first round distribution), and installation of washing facilities, along with an annual budget contribution for Restoring Family Links activities. PRC, IFRC and ICRC coordinated closely to ensure all returnees have access to services and to avoid any duplication of activities.

The PRC hosted Movement coordination meetings and operational meetings to share information with partners. The IFRC Philippine Country Delegation (CD) supported PRC with disseminating updates to Movement partners in-country and coordinated with the IFRC Asia Pacific Regional Office (APRO) in Kuala Lumpur in accordance with the IFRC Secretariat’s Emergency Response Framework. The IFRC CD and PRC are also coordinated closely with ICRC on security.

PRC achievements

PRC Services	Action taken
Welfare Services	267 individuals were reached with stigma reduction activities (267 in Zamboanga) 1,573 individuals registered for “I am Alive” (1,573 in Zamboanga) 5 individuals were supported with tracing requests (5 in Zamboanga) 47 individuals were supported with free sim/load (47 in Zamboanga) 2,345 hot meals / food packs distributed (1,573 in Zamboanga, 20 in Basilan, 522 in Sulu, and 241 in Tawi-Tawi) 1,674 individuals were provided with IEC materials on PSS, RFL, WASH, and Health (267 Zamboanga)
WASH	1,754 individuals were provided with hygiene kits (147 in Zamboanga, 20 in Basilan, and 1,068 in Tawi-Tawi) supported by ICRC 1 portable handwashing facility set up in Zamboanga 1 handwashing facility installed in Tawi-Tawi supported by ICRC
Health	2 individuals were provided with first aid services 449 individuals were provided with alcohol gel (sanitizer) and washable masks (149 in Basilan and 300 in Tawi-Tawi – other agencies provided similar items to returnees) 2,235 individuals reached through health promotion with key messages on COVID-19 preventive measures and other relevant diseases
DMS	20 individuals were provided with sleeping kits (20 Basilan)

Overview of non-RCRC actors in country

Coordination with the authorities

An inter-agency team was created which was called the Special Handling Operations for the Returning Filipinos from Sabah (SHOREFS). This inter-agency team was composed of national agencies and various Ministries of the Bangsamoro Government. The SHOREFS was responsible for the coordination and management for the arrival and facilitate the transfer of the REFS to their respective LGUs.

The DOH, through its Task Force for the Provision of Health Services to Filipinos in Sabah, and the Ministry of Health (MOH) Malaysia, together with Philippine Embassy in Kuala Lumpur (KLPE) / Assistance to Nationals (ATN) Unit, Department of Foreign Affairs-Office of the Undersecretary for Migrant Workers Affairs (DFA-OUMWA), and Sabah National Security Council (NSC), strengthened coordination through Standard Operating Procedures (SOP) for port-to-port collaboration for health care for Filipinos from the Temporary Detention Centers (TDCs) in Sabah.

The Regional Interagency Task Force for COVID-19 in Region IX (Zamboanga Peninsula) delegated the Office of the Civil Defense to lead the operations for REFS. It was joined by different national government agencies, local government units, non-government agencies, and other humanitarian organizations.

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. As an auxiliary to the government, the PRC maintains a strong relationship and collaboration with (i) National Disaster Risk Reduction and Management Council (NDRRMC); (ii) provincial, municipal and barangay (village) disaster risk reduction and management councils; and (iii) local government units defined in the Disaster Risk Reduction and Management Act. PRC participates in NDRRMC meetings and coordinates with the DSWD and DOH.

The Regional Disaster Risk Reduction Management Council IX – Zamboanga Peninsula invited PRC to join the SHOREF’s meeting on 10 November 2020 to discuss the resumption of the arrival of returnees after it was suspended due to the movement control in Malaysia. During this meeting, the local government also asked the support of PRC in responding to the needs of the 150 returnees from Sarawak, Malaysia.

Inter-agency coordination

At country level, PRC and IFRC CD are observers to and participate in meetings of the Humanitarian Country Team (HCT). PRC and IFRC were 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. IFRC is the co-lead of the Shelter Cluster with government lead agency Department of Social Welfare and Development (DSWD).

The International Organization for Migration also supported the returnees with sleeping kits while USAID supported the distribution of hygiene kits. Private organization (SAVEMORE) provided selected food items upon arrival of the first group of returnees. The government also provided cash assistance to all returnees as part of their overall support with a one-time payment worth PHP 3,000 per returnee.

IFRC’s support was required to fill service gaps to ensure all returnees have access to essential basic items and services and to provide first aid and psychosocial support to assist returnees in this transition. PRC chapters undertook assessment activities to ensure PRC service provision was complementary to government and other contributing actors’ inputs and to avoid any duplication of supplies and services.

Needs analysis and scenario planning

Needs analysis

Approximately 5,300 returning Filipinos planned to return from Sabah in groups of up to 400 persons, arriving in 15-day intervals. Bangsamoro Minister on Local Governments said all the groups of returnees were required to be processed through RT-PCR testing in Sabah. Upon returning negative results for the virus that causes COVID-19, they were permitted to travel through to the Philippines by sea and upon their arrival entered 14-day quarantine in government managed facilities.

Due to COVID-19 related restriction the repatriation process was delayed, hence as of 12 November 2020 only 2,119 of the target 5,300 returnees had arrived in-country. The Local Government will continue the repatriation process until all 5,300 returnees are repatriated back to Philippines. Therefore, there was a need to extend the time frame of the operation by two months until 31 January 2021 to ensure the planned assistance was provided to the returnees.

Summary of the needs analysis

An approximate 5,300 returning Filipinos were to return from Sabah with groups of up to 400 persons who were to arrive in 15-day intervals. Bangsamoro Minister on Local Governments said that the first group of returnees went through RT-PCR testing in Sabah and upon returning negative results for the virus that causes COVID-19, travelled through to the Philippines by sea and upon their arrival entered 14-day quarantine in government managed facilities. Philippine Red Cross Zamboanga Chapter officers conduct assessment with recent returnees from Sabah at the Zambo ECOZONE quarantine facility. Further COVID-19 testing was administered by respective local health authorities prior to the completion of returnees 14-day quarantine with additional active COVID-19 cases identified.

To mitigate the risks of COVID-19 transmission, all returnees were instructed to follow the health protocols set by DOH and local government authorities upon arrival in the country. The needs assessments undertaken with this first cohort of returns serves as the basis for PRC’s support plan for this action and addresses the returnees’ most immediate humanitarian needs. In addition to COVID-19 health risks, department of health (DOH) health assessments identified Filipinos in the Temporary Detention Centers in Sabah had recorded infections of skin diseases, tuberculosis, conjunctivitis, hypertension, asthma and upper respiratory tract infections.

Based on assessments undertaken by PRC chapter teams and in coordination with the local government unit (LGU), immediate needs of returnees included food, essential household items (blankets and sleeping mats), WASH (jerry cans, hygiene kits, and hand-washing facilities) and health inputs (mosquito nets, IECs, first aid and psychosocial support (PSS) services including psychological first aid). Staying connected was essential for returnees and domestic and international phone calls were crucial to restoring family links or sending “safe and well” messages.

The PRC operational plan reflects its coordination efforts between PRC National Headquarters and its four involved chapters – Basilan, Sulu, Tawi-Tawi and Zamboanga City – and their respective local government units, and the DSWD.

Targeting and scenario planning

The PRC targeted all 5,300 returnees from Sabah, Malaysia for this operation. Each returnee household or individual were to be provided with a PRC beneficiary card with their and household members’ names. The card formed the basis

for the recognition of bearers as beneficiaries of PRC. During distributions, PRC volunteers cross-checked that the names on the card were listed in distribution sheets. Upon receipt of any items or assistance, each eligible recipient signed the award sheets or lists.

Scenario planning is summarised as follows.

Scenario	Humanitarian consequence	Potential Response
COVID-19 presence in quarantine center(s)	Returnees contract COVID-19 and disease spreads through center and into community.	PRC will work with LGU and health workers/hospitals to support patient transfers and to strengthen pandemic prevention strategies. PRC will mobilize staff and volunteers to conduct health and hygiene promotion emphasizing handwashing and other preventive measures on COVID-19. The activities will be conducted based on health standard protocol observing social distancing and use of personal protective equipment (PPE). An emphasis on personal hygiene including mask use and frequent handwashing will be promoted with IEC materials and hygiene. Based on initial assessments undertaken by PRC chapter teams with the first group of returnees and in coordination with the local government unit (LGU), immediate needs include food, essential household items (blankets and sleeping mats), WASH (jerry cans, hygiene kits, and hand-washing facilities) and health inputs (mosquito nets, IECs, first aid and psychosocial support services including psychological first aid). Staying connected is essential for returnees and domestic and international phone calls are crucial to restoring family links or sending "safe and well" messages. Department of Health assessments indicate that diseases among returnees include skin diseases, tuberculosis, conjunctivitis, hypertension, asthma, and upper respiratory tract infection. Monitoring will be undertaken to ensure returnees have adequate supplies of PPE including soap, face masks, handwashing facilities and disinfectants. PRC observes quarantine facilities to ensure adequate spacing and engages with local authorities discuss observations and address needs.
Weather disturbances interrupt supply chain for relief items to quarantine centres	This action is time-bound with each group of returnees requiring inputs for the period they are in quarantine. Delays in receiving basic supplies of essential household items, food and other basic services could compromise health outcomes	PRC has a plan in place to distribute household items to returnees upon arrival. Contingency planning will be actioned between PRC NHQ and chapters.

Operational risks assessment

Possible operational risks that were identified included:

- There was a risk to the health safety of personnel and the returnees due to COVID-19 pandemic. Appropriate personal protective equipment (PPE) was to be provided for personnel involved in the DREF operation (i.e., face masks) as well as returnees. Advisory information was also be circulated to PRC staff and volunteers, as well as for supplementing government issued face masks for returnees when required, in terms of precautionary measures to be taken to protect health, and early warning early action systems identified for safe evacuation (in accordance with the authorities own contingency plans). Health protocols set by the health authorities and local government units were also followed such as social distancing, hand washing, wearing of face masks etc. to mitigate the risks of spreading the disease.
- Community quarantines were implemented in provinces across the country. There were limitations in terms of movement and access. Close coordination with local governments and focal points from the Inter-Agency Task Force for COVID-19 was required.
- Security risk posed by armed non-state actors in the areas was regarded as high and might impact on the implementation of the operation under this DREF operation or hinder access by IFRC/PRC personnel.
- Potential risk of Sexual and Gender Based Violence (SGBV) and other gender and inclusion concerns. Protection, Gender and Inclusion (PGI) minimum standards were used to ensure a "do no harm" approach, and elaborated on how the mitigation approach was included, establishment of protection referral pathways, training and sensitization of staff and volunteers and the referral of protection concerns and safeguarding in the operation (such as signing the Code of Conduct and Child Protection policy) for all staff and volunteers. There was close coordination between the IFRC CD, PRC and ICRC on security related issues.

B. OPERATIONAL STRATEGY

Overall Objective

The main objective of this DREF operation was to deliver humanitarian assistance to 5,300 people being repatriated to the Philippines from Sabah, Malaysia over a six-month timeframe.

Proposed strategy

This DREF supported PRC in complementing the efforts and assistance to be provided by the Government, and other actors, to the returnees in terms of conducting first-aid, psychosocial support (PSS) and restoring family links (RFL) as well as in providing returnee households with food and essential household items. The PRC also examined how best to collaborate with the Government to support social reintegration among returnees. The DREF also supported the PRC in conducting health and hygiene promotion.

As people returned as individuals and in family groups, distributions of relief items were managed accordingly with kits distributed to families or divided into individual sets for each person.

Key activities:

- Mobilized personnel and assets to provide first aid, as well as conducted rapid needs assessments
- Provided essential welfare services for returning migrants including PSS, ready to eat/hot meals, and RFL.
- Provided phone services as well as collected and processed safe and well messages
- Provided sim cards with prepaid loads to returnees to enable access to communication
- Distributed essential household items, health, and WASH items such as jerry cans and hygiene parcels to affected families
- Provided psychological first aid (PFA)
- Provided hygiene related items and disseminated key health promotion messages to affected families

The operation was underpinned by a commitment to quality programming that involved:

- Continuous and in-depth assessments and analysis to inform the design and implementation of the program.
- A continuous process of adjustments based on the assessments, throughout implementation.
- Adherence to IFRC Policy on Migration (2009) and relevant best practices and standards.
- Adherence to protection, gender and inclusion (PGI) measures, with focus on disability inclusive development. This included, amongst other activities, the collection of sex-age and disability disaggregated data, the application of Minimum Standards on PGI in Emergencies through the project cycle (including monitoring and reporting). There were efforts made to ensure equitable gender balance of staff and volunteers; as well as consideration made to promote the participation of women, men, girls and boys of all ages and backgrounds in the affected population, and of people with disabilities.
- Awareness of the impact of climate change and promotion of climate smart solutions as part of the operations (where it was appropriate).
- Establishment of mechanisms that facilitated two-way communication with and ensured transparency and accountability to affected people and highlighted the nature of communication and information as a life-saving mechanism.
- Management and delivery of the program was informed by appropriate monitoring and evaluation.
- A lessons learnt workshop was conducted to review the overall DREF operation; and generate recommendations for PRC to consider in future emergency response operations. This operation was also informed by the experience and lessons learned of PRC during the 2017 DREF operation.

Support Services

Human resources

The PRC mobilized NHQ and Chapters personnel including Red Cross 143 volunteers, Red Cross Action Teams (RCAT134) and National Disaster Response Team's members from other Chapters as required. The PRC Human Resources (HR) procedures were applied for all deployments. In total, 40 PRC personnel were involved in the response.

Logistics and supply chain

Logistics support for this operation was provided through the strong capacity of the PRC logistics built over the past years and an experienced IFRC CD in-country logistics team. Logistics activities effectively managed the supply chain, including procurement, customs clearance, fleet, storage and transport to distribution sites in accordance with the operation's requirements and aligned to IFRC's logistics standards, processes and procedures.

Communications

The PRC communication team ensured that the Red Cross response efforts were effectively communicated to its key target audiences in a timely manner. The Operations Center (OpCen) located at the PRC's National Headquarters (NHQ) collected information from the chapters and Red Cross 143 volunteers in the affected areas. Communication teams also posted updates and photos on Facebook and Twitter. PRC staff and volunteers across the country actively contribute to corporate communications through their own social media networks.

Security

The IFRC security framework was applicable to this operation. For PRC staff and volunteers, the National Society's security framework was applied. Regular and close coordination was maintained with the ICRC in accordance with the existing security framework and Movement's coordination agreement. Regular information sharing was maintained and as were specific security protocols for each level of security. In the country, all staff members and volunteers were required to take the IFRC Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security

Planning, monitoring, evaluation, & reporting (PMER)

Reporting during this operation was achieved in line with IFRC minimum reporting standards. One operations update was issued. Regular monitoring of activities was carried out by the operation team in the field, supported by technical staff from PRC NHQ and IFRC CD. A lesson learned workshop was held on January 23, 2021, in Zamboanga City and was attended by the Chapters involved in the operation: Zamboanga, Basilan, Sulu, and Tawi-Tawi (ZAMBASULTA), including colleagues from the Spanish Red Cross, ICRC, and IFRC.

Administration and Finance

The IFRC CD, through the finance and administration team, provided operational support for review, budget validation, bank transfers, and technical assistance for PRC on cost justification procedures, including review and validation of invoices. The PRC – which was working on the advance system – was supported by the IFRC for many years and is familiar with these financial procedures. All financial transactions conducted during this operation were conducted in accordance with the IFRC's standard financial procedures. The DREF project agreement was signed upon during the activation of the DREF.

C. DETAILED OPERATIONAL IMPLEMENTATION



Shelter

People reached: 2,119

Male: 1,059

Female: 1,059

Indicators:	Target	Actual
# of people restored their immediate safety and well-being through essential household items assistance	5,300	2,119
# of essential household items will be distributed to affected people	2,000	356

Narrative description of achievements

People who returned from Sabah had to immediately enter 14-day COVID-19 quarantine. Many returned with few possessions and required basic essential household items for their quarantine period. Hence, PRC provided returnees with essential household items including blankets, sleeping mats and mosquito nets. People returned as individuals or in family groups. Distributions of relief items were managed accordingly with kits distributed to families or were divided into individual sets for individuals.

COVID-19 restriction caused delays in the scheduled repatriation process. Hence, as of 31 January 2021 only 2,119 of the target 5,300 returnees had arrived in-country. Meanwhile, there had been significant delay as well in terms of the deployment of essential household items from Cebu warehouse to Zamboanga due to quarantine protocols and requirements. Items were transported between regional borders. Items were dispatched by end of November 2020 through deployment of rented trucks from Cebu to Zamboanga. The PRC used its prepositioned stocks for the distributions. The DREF funds were used to replenish the items distributed.

At the closure of this operation, 356 individual sleeping kits (1 blanket, 1 mosquito net, and 1 sleeping mat) were distributed. The government was able to provide the household items for the REFS until the PRC stocks arrive.

The balance of the essential household items was distributed by the Chapter after the closing of the DREF with the operational costs covered by the PRC Chapter and IFRC operational plan.

Challenges

One of the challenges identified was the shipping of household items from the Cebu warehouse to Zamboanga. The delay was caused by logistical arrangements due to COVID-19 travel restrictions. The items only arrived in December where no repatriation activity happened until 5 March 2021.

Zamboanga City is a class "A" Chapter – meaning that the Chapter has the capacity (logistical, human resources, financial) to support the initial stages of the operations). Conversely, Basilan, Sulu, and Tawi-Tawi are class "D" – much less capacity than Zamboanga and experienced challenges in finance and in providing human resources and logistics to support its day-to-day operation. One of the challenges identified by these three chapters was inadequacy of facilities such as storage spaces for their stocks and inadequate area where they can prepare their food.

COVID-19 restriction caused delays in the scheduled repatriation process, where PRC was unable to reach the initial targeted 5,300 people within the project timeframe. Hence, PRC chapter will continue assistance after the closing of the DREF with the operational costs covered by the PRC Chapter and IFRC operational plan.

The congested detention centres exposed returnees to the risk of transmission of diseases. [World Health Organization](#) reported that inadequate shelter and overcrowding are major factors in the transmission of diseases with epidemic potential such as acute respiratory infections, meningitis, typhus, cholera, scabies, etc.

Lessons Learned

Considering the COVID-19 related travel restrictions, the need to identify different modes of transportation or local sourcing to enable improved distribution of essential household items has been highlighted.



Livelihoods and basic needs

People reached: 3,298

Male: 2,942

Female: 547

Indicators:	Target	Actual
# of people able to meet their basic needs	5,300	3,298
# of people are provided with Ready to Eat Food / Hot Meals (as part of PRC Welfare Support)	5,300	3,298

Narrative description of achievements

Families undergoing isolation in quarantine centres were provided with 3,298 regular hot meals. Local governments managing the quarantine centres provided hot meals for returnees. The PRC supplemented this service to ensure minimum nutritional requirements were met.

With the arrival of every batch of returnees, PRC Mindanao chapters (Zamboanga, Basilan, Sulu and Tawi-Tawi) immediately established welfare desks that served as a one-stop shop including provision of hot meals. The PRC chapters provided hot meals and food packs to 3,298 individuals (1,568 Zamboanga, 20 Basilan, 151 Sulu, 229 Tawi) at arrival. To minimize the interaction between the returnees and the responders, food packs were distributed which included one bottle of water, two cup noodles, two sandwiches, mints, and crackers).

Local governments managing the quarantine centres provided hot meals for returnees. The PRC supplemented this service by providing hot meals and food packs at the arrival.



PRC chapters in Zamboanga, Basilan, Sulu and Tawi-Tawi providing hot meals and food packs to the Filipino returnees in port of arrival. (Photo: PRC)

Challenges

Stores selling essential items were closed during lockdowns. When stores were reopened, supplies available were scarce and some stores could not provide an official receipt which created challenges for resupply and administration.

Lessons Learned

There is a recommendation around supporting the REFS in terms of looking at their medium and long-term needs especially around livelihoods support.



Health

People reached: 2,235

Male: 1,741

Female: 494

Indicators:	Target	Actual
# of people reached through NS health management programmes	5,300	2,235
# of staff and volunteers conducted health assessment to affected population	4	4
# of mosquito nets will be distributed to affected people	2,000	356
# of health volunteers conducted community-based disease prevention and health promotion activities	10	6
# of people reached with psychosocial support	5,300	1,533
# of volunteers trained on psychosocial support	20	15

Narrative description of achievements

Considering the COVID-19 situation in country, the PRC incorporated COVID-19 into its response protocols. To ensure the health and safety of PRC volunteers and staff, personal protective equipment (PPE) was provided. All volunteers engaged in the operation team were provided with minimum PPE (mask, gloves, and face shield). Furthermore, PRC volunteers and staff always adhered to health and safety measures imposed by the Government. These measures limited the risks of spreading the virus and protected those involved (staff, volunteers and returnees).

Each returnee's health needs were different, and these were identified via a health assessment in the quarantine centers but with limitations due to strict Infection Prevention and Control (IPC) protocol of LGUs. Assessments were conducted in four chapters upon arrival of the returnees by PRC volunteers. Furthermore, if any returnees required medical attention, they were referred to the Department of Health (DOH) assigned team and local health unit for further medical attention.



Health Teaching at Barangay Sta Catalina, Zamboanga City for prevention and control of spread of COVID-19. (Photo: PRC)

Vector-borne diseases cause major health burdens in the Philippines. The main diseases are malaria and dengue. As a prevention measure, returnees were provided with insecticide-treated mosquito nets. There were significant delays experienced with the delivery and distribution of mosquito nets due to quarantine protocols and requirements. Items were transported between regional borders. Items were dispatched in December through deployment of rented trucks from Cebu warehouse to Zamboanga. Each person was provided with one mosquito net as part of the sleeping kit. Total of 356 nets were distributed by 31 January 2021 and the remaining nets were distributed by the Chapter after the closing of the DREF with the operational costs covered by the PRC Chapter and IFRC operation plan.

2,235 individuals were reached through health promotion and disease prevention sessions with key messages on COVID-19 preventive measures and other relevant diseases. PRC conducted the session not only for returnees but also with communities where migrants were returning. For areas with strict IPC protocol, promotional videos about health and hygiene promotion were played inside the quarantine facilities.

Health teachings were conducted at various barangays with participants from barangay officials, indigenous leaders and community members.

Furthermore, PRC chapters distributed leaflets and brochures to returnees as part of Information Education and Communication (IEC) materials relevant to COVID-19, dengue and PSS. These IEC materials were translated into Tausug, Chavacano, and Malay languages.

During community awareness sessions, volunteers also posted tarpaulins with key messages about COVID-19 preventive measures that were visible in the community. The chapters were supported with printing of IEC materials/visibility (stickers and other documents).

Repatriation and quarantine requirements due to COVID-19 had a significant impact on the psychosocial well-being of returnees. Some returnees have faced difficulties in terms of their physical health, mental health and family loss of communication while they were staying in the detention centres in Malaysia due to lack of proper travel documents and most of them returned home practically without a single coin in their pockets. Therefore, psychosocial first aid (PFA) was provided to 1,533 people. Volunteers paid special attention to the children and most vulnerable segments of the population. Staying connected with family members were essential for returnees. Total of 399 people were

provided with domestic and international phone calls (free calls / SIM packs / prepaid loads) were crucial for restoring family links or sending “safe and well” messages.

PRC chapters in collaboration with social workers from Department of Social Welfare and Development Office conducted PSS interventions - basic psychological support (case management and group interventions). Furthermore, PRC established a hotline, where returnees could have access to remote PFA.

Prior to deploying volunteers for PPS activities, a one-day orientation/ refresher course was conducted at the chapter level. Total of 20 volunteers participated in the refresher course. PSS Kits were provided to chapters to increase their capacity and equip them with necessary materials needed for providing psychosocial support.

PRC and DOH organized a cluster meeting on Mental Health and Psychosocial support (MHPSS) to discuss the needs and concerns of the returnees, map-out resources, and explore the future response for MHPSS. It was attended by the DOH, DSWD -PCDP, OCD, and IOM. The team was able to interview and give PSS to some returnees in the community and asked them about their previous experiences.

Challenges

There were significant delays experienced with the delivery and distribution of some health resources, such as mosquito nets, due to quarantine protocols and quantity required. In addition, no ambulance service was available to transport the patient to the hospital if there was a need to do so. When mobilizing volunteers, chapters have expressed their concern that they do not have enough PPE.

Lessons Learned

There are many strong and diverse experiences of the staff and volunteers of the Philippine Red Cross regarding health and care work for vulnerable migrants and displaced persons in the Western part of Mindanao, however much more can be done. It was noted that the Health and Migration Orientation with chapters helped implement the operation.

During the lessons learnt workshop, there was a need identified to cascade further the Health in Migration and Displacement training module to ensure learning continuity among chapter staff and volunteers. It was recommended to also do this training as well with other relevant agencies especially with the government.

Congested detention centers in Malaysia exposed individuals to infection and disease. Based on the records from DOH, migraine, respiratory tract infection and skin disease were the top three common medical conditions of the returnees.



Water, sanitation and hygiene

People reached: 2,377

Male: 1,841

Female: 394

Indicators:	Target	Actual
# of people provided with sanitation and hygiene-related services that meet agreed standards according to specific operational and programmatic context	5,300	2,377
# of jerry cans will be distributed to affected people	2,000	De-prioritized
# of handwashing facilities installed/established	4	1
# of people reached with hygiene promotion	5,300	2,377
# of individuals provided with hygiene kits	2,000	1,754

Narrative description of achievements

PRC WASH Team in ZAMBASULTA chapters conducted assessment on the quarantine facilities and conducted a meeting with LGU to discuss future plans of the facility for the incoming returnees and assessed other needs of the returnees related to water supply, solid waste management, sanitation and hygiene. The WASH team hitherto reached 2,235 individuals served from batch 1 to 5 by establishing portable hand washing facility, hygiene promotion and disinfection of returnee's belongings and perform/demonstrate proper hand washing upon the arrival of the returnees.

Based on the assessment, water supply in the quarantine facilities were deemed to be functioning well. Jerry cans and potable mineral water were provided by the LGU for health care personnel and returnees in the quarantine facilities. Therefore, distribution of jerry cans was no longer needed and the budget for this was allocated for additional resources for the hygiene kits.

During the initial response, ICRC supported in the mobilization of volunteers to conduct hygiene promotion and procurement of hygiene kits for four chapters, and installation of handwashing facility in Tawi-Tawi. This is linked to the COVID-19 support of ICRC in Mindanao chapters.

The need for sufficient handwashing facilities were heightened due to the pandemic. Hence PRC Zamboanga chapter installed one portable hand washing facility in the port area and conducted handwashing demonstration upon arrival of the returnees.

Procurement of additional individual hygiene kits (2,000 kits) charged to this operation were provided through local procurement. Individual hygiene kits included bath soap, soap holder, toothbrush, toothpaste, shampoo, hand towel, and Eco-bag.

Furthermore, PRC mobilized its RC143 WASH volunteers to disseminate key hygiene promotion messages, with a focus on personal hygiene, solid waste management, prevention of diarrhea, prevention of COVID-19 (handwashing, physical distancing and wearing mask) and proper use of hygiene kits. Hygiene promotion messages were included into IEC materials and distributed among returnees. A total of 2,377 people were reached via hygiene promotion.

In partnership with a local partner – IPI Bioderm Soap, 23 participants (3 Barangay Officials and 20 Barangay Health workers from Barangay Arena Blanco in Zamboanga City) participated in the global advocacy for the celebration of Global Handwashing Day, to increase awareness and understanding about the importance of handwashing amidst the increasing number of COVID-19 cases in the community.



HYGIENE KIT
(FOR ADULT)

ESTIMATED AT PHP 150.00
ONE KIT FOR ONE ADULT

CONTENTS PER KIT

ITEM DESCRIPTION	QTY	UNIT
Bath Soap (Safeguard white – 90 grams)	1	piece
Soap Holder (Red in color)	1	piece
Toothbrush (Springmaid - Soft bristle with cap)	1	piece
Toothpaste (50 mL tube)	1	piece
Shampoo (5 mL sachet)	15	sachet
Hand towel (Cotton, white, 14" x 27" size)	1	piece
Ecobag (red)	1	piece

Challenges

The need to mitigate risks of COVID-19 transmission was omnipresent throughout the operation. This required additional resources to achieve behavioral objectives (Handwashing, physical distancing and wearing mask) and proper use of hygiene kits.

Lessons Learned

The congested detention centres exposed the individuals to infection and diseases. The returnees usually arrived often in the middle of the night, often in the state of disorientation and fatigue. Based on key informant interviews with the returnees, the identified immediate needs included temporary accommodation, hot meals, sleeping materials, hygiene items, medical support, and psychosocial support.



Protection, Gender and Inclusion

People reached: 1,968

Male: 1,621

Female: 347

Indicators:

Target

Actual

# of people have access to PGI services	5,300	2,119
Sex-age and disability disaggregated data is collected	Yes	Yes
% of staff and volunteers sign the code of conduct	100%	100%

Narrative description of achievements

The PRC ensured that the operation has integrated a ‘do no harm’ approach into all aspects of planning and programming. PRC ensures a safe and equitable provisions of basic services are being provided to all 2,119 REFS, considering different needs based on gender and diversity factors.

The PRC captured sex and age disaggregated data (SADD) for the purpose of understanding needs and accountability to communities, to analyze who is directly benefitting and who is not benefitting from services; and to understand the number and specific vulnerabilities of women to men based on their gender roles and age (i.e., to understand if a higher proportion of women, children or men are made vulnerable). Furthermore, SADD supported sectoral teams to included measures to address vulnerabilities specific to gender and diversity factors (including people with disabilities) in their planning. Sector teams ensured that minimum standards for Sexual and gender-based violence (SGBV) were met.



PRC Zamboanga City chapters was supported with PGI related trainings as part of a capacity development activity in ensuring that PGI activities are well-integrated in the programme. (Photo: PRC)

PGI related trainings were conducted with Zamboanga chapters. On 5 October 2020, 16 volunteers attended the PGI assessment training. The training included the introduction of a tool which will be used to benchmark knowledge, skills and confidence of the volunteers and staff who are supporting the operation and implementing the activities. On 7 October 2020, 18 volunteers attended training on Protection, Gender and Inclusion Minimum Standards (Dignity, Access, Participation and Safety (DAPS) Framework) and Violence Prevention and Response to mainstream protection measures within the operation.

To establish and enhance the existing local referral systems and services for sexual and gender-based violence (SGBV) and in safeguarding concerns, Zamboanga City Chapter organized a stakeholder meeting through an online platform on 13 October 2020. It was attended by representatives from Department of Health (DOH), Barangay League, Women and Children Protection Desk – Philippine National Police (WCPD PNP) and PRC NHQ PGI and PSS focal person.

On 21 October 2020, a Gender-based Violence (GBV) meeting was organized by the Gender and Development (GAD) Unit of the City Mayor’s Office. It was in coordination with USAID Reach Health Project who works on a Gender-based Violence Service Mapping Tool and Referral System for Zamboanga Peninsula. The meeting also serves as a venue to discuss the PGI component of the project and the PRC’s Operational Guidelines on Sexual and Gender-Based Violence Prevention, Mitigation, and Response During Emergencies.

Since PRC had no direct access to returnees who are staying in the quarantine facilities, PRC built its advocacy works around PGI through coordination and collaboration with both government and other relevant stakeholders who are present in the region. Furthermore, all the staff and volunteers with PRC and IFRC were required to sign the code of conduct. This Code of Conduct aimed to maintain standards of behavior.

Five wheelchairs were procured and distributed to Chapters for mobilization of elderly and people with a disability upon arrival of returnees.

Challenges

Due to COVID19, migrants faced a considerable amount of stigmatization among community members, this may mean people are labelled, stereotyped, discriminated against, treated separately, and loss of status because of a perceived link with the disease. The COVID19 outbreak has provoked social stigma and discriminatory behaviours against these people.

Lessons Learned

It is essential to integrate the DAPS Framework in terms of providing efficient and relevant service to migrants of all ages, gender, and disability. Their status as irregular migrants, their limitation in terms of access to services and support, places them in a highly challenging position.



Migration

People reached: 2,141

Male: 1,793

Female: 348

Indicators:

Indicators:	Target	Actual
# of displaced people reached with information and services provided from welfare desks	5,300	2,119
# of people have access to basic services	5,300	2,119
# of individuals linked to their family through the RFL service of PRC.	Needs based	2,141

Narrative description of achievements

Standard services provided under the welfare desk set up by PRC were (i) restoring family links (RFL); (ii) tracing; and (iii) referral. PRC established welfare desks with RFL teams, who were working in close collaboration with ICRC in the affected areas where they provided RFL support to the affected population and linked them with other agencies for needed services. The PRC registered returning migrants, irrespective of their status, and with privacy and data protection concerns addressed. The PRC and IFRC advocated to the government for the rights of the returnees in terms of proper documentation and helped them to access basic services in the country.



A PRC volunteer, in full PPE, provide load and sim card to a returnee upon his arrival in Zamboanga port from Sabah, Malaysia. (Photo: PRC)

The PRC conducted an orientation program for staff and volunteers on Migration, including RFL and Health with IEC materials. This assisted staff and volunteers to refresh their knowledge.

The PRC supported the returnees' family members, located in communities, with counselling, referrals, etc. Staff trained in Health in Migration and Displacement were deployed to support the operation. PRC provided free call assistance to 421 people which "I am Alive" RFL assistance to 1,720 people, which enabled to reach 2,141 people via RFL activities.

Forty staff and volunteers from four chapters were oriented on Migration and Displacement. Key topics included categories of migrants, why people are on the move, climate-induced migration, needs of migrants in place of origin, during transit, at their destination, and upon return; approach of the RCRC Movement on migration, and the importance of understanding health risks and needs in migration and displacement. This training enhanced Chapter skills to assess and respond to the needs of the displaced population throughout the emergency.

Challenges

There were delays in the repatriation process due to the spread of the virus in detention centers. Later, the threat from the COVID-19 UK variant in Sabah, Malaysia has led to the suspension of repatriation activity.

Lessons Learned

Restoring communication and linking families of returnees from Sabah, Malaysia is one of the activities that was offered by the Philippine Red Cross – Zamboanga City chapter. One of the lessons learnt from the Mindanao Returnees DREF operation in 2017 was to mobilize volunteers who can speak the language of the returnees. For this operation, one of the strengths of the volunteers mobilized is that they can speak Chavacano, Tausug, Sama and Malay. This enabled them to communicate with the REFS with less difficulty.

The NS has Migration policies and strategies which supported and guided the DREF operation. However, there is a need to restrengthen the cascading of information to ensure continuity of knowledge and learning among staff and volunteers. It was noted that the Health and Migration Orientation with chapters helped implement the operation.

The need was identified to Cascade further the Health in Migration and Displacement training module to ensure learning continuity among chapter staff and volunteers. It was further recommended to also do this training as well with other relevant agencies especially with the government. Support needs for migration services in this region are anticipated to be ongoing, beyond the horizon of this response.

Strengthen National Society

Indicators:	Target	Actual
# of NS branches that are well functioning (in the operation)	4	4
% of volunteers insured	100%	100%

Narrative description of achievements

Four chapters responded for the Mindanao Returnees DREF operation: Zamboanga, Basilan, Sulu and Tawi-Tawi (ZAMBASULTA). Total of 40 volunteers were mobilized for the operation. Prior to mobilization, an orientation and training were conducted to equip them with necessary skills and knowledge for implementing sectoral activities. Specific training included community engagement and accountability, violence prevention and response, RFL, health in migration and psychosocial support. All volunteers recruited were provided orientation on the history and seven fundamental principles of the Red Cross Red Crescent Movement. All volunteers mobilized for this operation were insured under the Membership and Accident Assistance Benefit (MAAB) of PRC.

PRC has developed a Business Continuity Plan which aimed to ensure the functionality of the National Society to continue the delivery of critical humanitarian services to the most vulnerable. It also serves as guidance to all our staff, volunteers, and Movement Partners operating in the country for its adherence, safety, and protection against the impact of COVID-19.

Considering that ZAMBASULTA is a region where security is a concern, all staff and volunteers mobilized in the operation were oriented on safer access. The familiarity of chapters in their jurisdiction and adherence to security protocol have ensured the safety of all staff and volunteers.

Challenges

For Basilan, Sulu and Tawi-Tawi chapters communication is a big challenge. Both internet and mobile network are a challenge, causing delays in any communications. Since most of the orientation and training was conducted online – due to the travel restrictions and safety protocols that must be adhered to amidst COVID-19 – chapters have trouble accessing these orientations and training.

There was a lack of accurate REFS database for arrivals, this limits tracing and assessment of their needs.

Lessons Learned

Opportunities do exist to establish new and strengthened partnerships through close coordination with key stakeholders. Additional logistical support is required for chapters is required for operations of similar scale and complexity as this operation.

International Disaster Response

Indicators:	Target	Actual
NS coordinated international disaster response effectively	Yes	Yes
1 rapid response personnel support the operation	1	1
DREF procedures are applied during the implementation of the operation	Yes	Yes
% of target population satisfied with support received	80%	To be conducted

Logistics department provides constant support to the National Society's logistics unit for replenishment and other procurements	Yes	Yes
# of coordination meetings held with other stakeholders	3	3
Complementarity and strengths of the Movement enhanced	Yes	Yes
Movement coordination is well-established	Yes	Yes

Narrative description of achievements

The IFRC mobilized rapid response personnel – an operations manager profile – to provide overarching surge support to Mindanao Returnees operation and all other ongoing operations: ([MDRPH032](#), [MDRPH036](#), [MDRPH038](#) and [MDRPH041](#)). Remote support has been provided by APRO through the Senior Migration and Displacement Officer.

The IFRC Philippines Country Delegation provided support to PRC to ensure accountability and compliance with regards to the DREFs and Appeals procedures. For this operation, this included the preparation of a [DREF](#), an emergency plan of action, and this operations update, all published on the public [IFRC Appeals Database](#).

Community Engagement and Accountability (CEA) Online Training

On 5 August, an online CEA orientation was conducted for the ZAMBASULTA chapters. A total of 18 participants from Zamboanga Chapter attended the training. The training aimed to mainstream CEA activities across the whole programme cycle. One of the ways forward from the training was to set up a feedback mechanism in the ground. The PRC provided a local number to the REFS, so they had a means of communication to the PRC for feedback.



PRC Zamboanga chapter is doing a stigma reduction activity, as part of the overarching CEA initiative, among REFS-receiving communities. (Photo: PRC)

Community engagement, accountability and feedback/response mechanisms was integrated into programming to ensure that affected populations have direct access to information on the nature and scope of services provided by PRC, along with processes that will enable community participation and feedback. PRC chapters distributed to returnees the leaflets and brochures as part of Information Education and Communication (IEC) materials relevant to COVID-19, dengue, PSS and PRC services.

During assessment, affected-community members were consulted about their needs. Chapters also provided contact details to support referral activities should the REFS needed assistance.

Stigma Reduction Activities and distribution of IEC materials

COVID-19 caused mass global disruption and placed the most vulnerable, including men and women migrants and their children, in great hardship. Migrants crossing borders and locally stranded individuals going to the provinces of Zamboanga, Sulu, Basilan and Tawi-Tawi usually were being tagged as the carriers of the disease and even more the cause of the increasing number of COVID-19 in Mindanao. The PRC conducted stigma reduction activity in communities where migrants reside upon arrival in the Philippines. Stigma reduction topics included information around migration and why migrants leave for another country, how COVID-19 is being spread, and ways on how people can prevent the spread. The PRC reached five barangays with a total of 298 barangay force multipliers, health workers and council members attended these activities.

Logistics support

Logistics support for this operation was provided through the strong capacity of the PRC logistics built over the past years and an experienced IFRC CD in-country logistics team. Logistics activities aimed to effectively manage the supply chain, including procurement, customs clearance, fleet, storage and transport to distribution sites in accordance with the operation's requirements and aligned to IFRC's logistics standards, processes and procedures.

In support of the operation, the IFRC CD logistics team procured 5,000 prepaid sim cards for the returnees. In-country logistics is also supporting the deployment of a rented truck which will transport the essential households' items (2,000 set of sleeping kits which consists of 2 blankets, 2 plastic mats and 2 mosquito nets) from Cebu warehouse to Zamboanga City. All movement of disaster preparedness stocks were in close coordination with PRC Logistics and Disaster Management Services Departments. Replenishment of these items will be done internationally, with support from APRO Logistics' Procurement and Supply Chain Management office.

Coordination PRC Chapters had established a well-defined auxiliary role and a clear mandate on its areas of intervention with public authorities. Chapters can provide complementary support to the government efforts in supporting the needs of the Returning Filipinos from Sabah, Malaysia through the Mindanao Returnees DREF

operation. The capacity of the Government authorities has been stretched as well since they have been catering to the needs and have been providing support to locally stranded individuals. At some point, the local government authorities rely heavily on the capacity of the chapter in supporting the REFS.

Coordination varies from different chapters. Some chapters have very good coordination with their respective LGUs, while other chapters have challenges. There are some gaps in terms of information sharing on the arrival of REFS and the number of people returning. There are also areas in the process of sending REFS from Zamboanga City – the first stop of the REFS from Sabah, Malaysia before they were sent to their different provinces – down to different provinces of Basilan, Sulu, and Tawi-Tawi.

Some chapters were also able to attract small funding opportunities from the local government unit. They provided a monetary subsidy to the chapter to support them with their repatriation works.

Coordination activities conducted in the ground included:

- Stakeholders Mapping on Local Referral System on 13 October 2020.
- GBV Meeting on 21 October 2020:
- Cluster Meeting on Mental Health and Psychosocial support (MHPSS): PRC and DOH organized a cluster meeting to discuss the needs and concerns of the returnees, map-out resources, and explore the future response for MHPSS. It was attended by the DOH, DSWD -PCDP, OCD, and IOM.

The PRC lead the Movement's overall response for this operation, maintained close coordination with Movement partners in the country and provided updates. The PRC worked with the IFRC, the ICRC and seven Partner National Societies in the country: the American Red Cross, the Canadian Red Cross, the Finnish Red Cross, the German Red Cross, the Japanese Red Cross Society, the Netherlands Red Cross and the Spanish Red Cross. On 7 June 2018, the ICRC, the IFRC and the PRC formally signed the Movement Coordination Agreement, making the PRC the leader of all emergency operations in the country with the support of the ICRC and the IFRC. The PRC is held a monthly in-country Movement-wide meeting to update partners on ongoing plans and activities. Partners also shared relevant information about plans and activities in the country.

In August 2020, PRC convened a meeting with partners. It was attended by ZAMBASULTA chapters, Spanish Red Cross and the IFRC. Spanish Red Cross is providing IM support towards the operation. ICRC has provided 1,238 hygiene kits to returnees (147 in Zamboanga, 20 in Basilan, and 1,068 in Tawi-Tawi) and installed a handwashing facility in Tawi-Tawi.

Business Continuity

PRC developed a Business Continuity Plan which aimed to ensure the functionality of the National Society to continue the delivery of critical humanitarian services to the most vulnerable. It also served as guidance to all staff, volunteers, and Movement Partners operating in the country for its adherence, safety, and protection against the impact of COVID-19.

The support provided to the REFS was relevant to their needs such as food, psychosocial support, and linking them to their family members through the Restoring Family Link activity.

Challenges

There was a lack of an accurate REFS database to trace and assess specific needs of REFS after they went out from the quarantine facilities. Through the DREF operation, sufficient budget requirements were secured to support the program implementation. However, due to the COVID-19 situation, challenges and limitations the expected 5,300 returnees were not met. There were delays in the repatriation process due to the spread of the virus in detention centers.

Later, the threat from the COVID-19 UK variant in Sabah, Malaysia led to the suspension of repatriation activity.

There was a challenge regarding data management. Since chapters did not have direct access to the REFS, chapters relied on the information and data being shared by the local government unit.

Lessons Learned

There is a need to improve coordination within the government system and then coordination with PRC and relevant government counterparts.

Influence others as leading strategic partner

Indicators:	Target	Actual
IFRC and PRC participate in local, national and international dialogues / meetings	Yes	Yes
# of communications materials produced/published	5	7
Narrative description of achievements		
<p>The PRC communication team ensured that the Red Cross response efforts were effectively communicated to its key target audiences in a timely manner. The Operations Center (OpCen) located at the PRC's National Headquarters (NHQ) collected information from the chapters and Red Cross 143 volunteers in the affected areas. Communication teams also posted updates and photos on Facebook and Twitter PRC staff and volunteers across the country actively contributed to corporate communications through their own social media networks.</p> <p>In total, there were at least five tweets on Twitter and one Facebook post about the efforts around REFS in Mindanao. The response was also featured on PRC's regular Sunday program over DZMM Teleradyo on 30 August 2020.</p>		
Challenges		
No challenges reported.		
Lessons Learned		
No lessons learned.		

Effective, credible and accountable IFRC

Indicators:	Target	Actual
Effective performance of staff supported by HR procedures	Yes	Yes
% compliance with PRC HR procedures	100%	100%
% financial reporting respecting the IFRC procedures	100%	100%
% operational staff for IFRC receive security briefing	100%	100%
Narrative description of achievements		
<p>The PRC mobilized NHQ and Chapters staff, Red Cross 143 volunteers, Red Cross Action Teams (RCAT134) and National Disaster Response Team's members from other Chapters as required. The PRC Human Resources (HR) procedures were applied for all deployments. In total, 40 PRC personnel were involved in the response.</p> <p>The IFRC CD, through the finance and administration team, provided operational support for review, budget validation, bank transfers, and technical assistance PRC on cost justification procedures, including review and validation of invoices. The PRC – which operated on the working advance system – was supported by the IFRC for many years and is used to these financial procedures. All financial transactions in this operation were conducted in accordance with the IFRC's standard financial procedures. The DREF project agreement was signed upon the activation of the DREF, however, the process was revised through an addendum on the expanded allocation to the operation as a loan to the appeal.</p> <p>The IFRC security framework was applicable to the operation. For PRC staff and volunteers, the National Society's security framework was applied. Regular and close coordination was maintained with the ICRC in accordance with the existing security framework and Movement's coordination agreement. Regular information sharing was maintained and specific security protocols for each level of security. In the country, all staff members and volunteers are required to take the IFRC online courses: Stay Safe Personal Security, Stay Safe Security Management and Stay Safe Volunteer Security</p> <p>Basilan, Sulu and Tawi-Tawi are areas in red phase as per the movement coordination access map. Red phase areas are considered as no go areas, hence, no IFRC staff were deployed in these areas. Zamboanga City in orange phase, which would require proper coordination with ICRC if there were a need for deployment.</p>		

Challenges
No challenges reported.
Lessons Learned
No lessons learned.

D. Financial Report

A total of CHF 112,984 was allocated from DREF fund for PRC to respond to the needs of approximately 2,119 people. Total expenditure recorded by the end of the operation was CHF 97,500 (86.3 per cent of the budget spent), leaving a balance of CHF 15,484. Balance is mainly due postpone of activities due to travel restriction in line with COVID-19. Hence, the only 2,119 people were able to return to Philippines from the target of 5,300 people. The unspent balance will be returned to the DREF pool. For further details on expenditure, please refer to the attached final financial report.

The major donors and partners of the Disaster Relief Emergency Fund (DREF) include the Red Cross Societies and governments of Belgium, Britain, Canada, Denmark, German, Ireland, Italy, Japan, Luxembourg, New Zealand, Norway, Republic of Korea, Spain, Sweden and Switzerland, as well as DG ECHO and Blizzard Entertainment, Mondelez International Foundation, and Fortive Corporation and other corporate and private donors. The IFRC, on behalf of the PRC, would like to extend thanks to all for their generous contributions.



Click here for:

- [DREF Operation](#)

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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.

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**.

DREF Operation

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/7-2021/3	Operation	MDRPH040
Budget Timeframe	2020/7-2021/1	Budget	APPROVED

Prepared on 23/Apr/2021

All figures are in Swiss Francs (CHF)

MDRPH040 - Phillipines : Mindanao Returnees

Operating Timeframe: 19 Jul 2020 to 31 Jan 2021

I. Summary

Opening Balance	0
Funds & Other Income	112,984
DREF Allocations	112,984
Expenditure	-97,500
Closing Balance	15,484

II. Expenditure by area of focus / strategies for implementation

Description	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction			0
AOF2 - Shelter	10,650	19,405	-8,755
AOF3 - Livelihoods and basic needs		20,614	-20,614
AOF4 - Health		3,496	-3,496
AOF5 - Water, sanitation and hygiene	10,650	9,137	1,513
AOF6 - Protection, Gender & Inclusion	55,819	64	55,755
AOF7 - Migration	25,254	15,782	9,472
Area of focus Total	102,373	68,498	33,875
SFI1 - Strengthen National Societies	7,172	21,851	-14,680
SFI2 - Effective international disaster management		1,156	-1,156
SFI3 - Influence others as leading strategic partners	3,439	5,994	-2,554
SFI4 - Ensure a strong IFRC			0
Strategy for implementation Total	10,611	29,001	-18,390
Grand Total	112,984	97,500	15,484

DREF Operation

FINAL FINANCIAL REPORT

Selected Parameters			
Reporting Timeframe	2020/7-2021/3	Operation	MDRPH040
Budget Timeframe	2020/7-2021/1	Budget	APPROVED

Prepared on 23/Apr/2021

All figures are in Swiss Francs (CHF)

MDRPH040 - Phillipines : Mindanao Returnees

Operating Timeframe: 19 Jul 2020 to 31 Jan 2021

III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies	22,353	41,578	-19,225
Clothing & Textiles	10,000	17,122	-7,122
Food		10,183	-10,183
Water, Sanitation & Hygiene		178	-178
Medical & First Aid	10,000	14,095	-4,095
Other Supplies & Services	2,353		2,353
Land, vehicles & equipment	1,522	1,643	-122
Computers & Telecom	1,522	1,643	-122
Logistics, Transport & Storage	12,560	5,739	6,821
Distribution & Monitoring		361	-361
Transport & Vehicles Costs	12,560	5,378	7,182
Personnel	6,470	9,016	-2,546
National Staff		74	-74
National Society Staff	6,470		6,470
Volunteers		8,943	-8,943
Workshops & Training	2,641	14,974	-12,332
Workshops & Training	2,641	14,974	-12,332
General Expenditure	8,130	18,599	-10,468
Travel	1,475	3,146	-1,671
Information & Public Relations		1,869	-1,869
Office Costs		5,940	-5,940
Communications	6,605	7,599	-994
Financial Charges	51	46	5
Operational Provisions	52,412		52,412
Operational Provisions	52,412		52,412
Indirect Costs	6,896	5,951	945
Programme & Services Support Recover	6,896	5,951	945
Grand Total	112,984	97,500	15,484