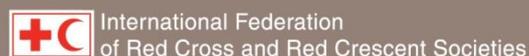


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DREF Final Report

Saint Vincent and the Grenadines: Dengue Outbreak



DREF operation n° MDRVC004	
Date of Issue: 13 September 2021	Operation start date: 2 November 2020 Operation end date: 31 March 2021
Host National Society: Saint Vincent and the Grenadines Red Cross (SVGRC)	DREF allocated: 175,039 Swiss francs (CHF)
Number of people affected: 1,760 (confirmed laboratory dengue cases)	Number of people assisted: 8,780 people (1,756 families)
Red Cross Red Crescent Movement partners currently actively involved in the operation: The International Federation of the Red Cross and Red Crescent Societies (IFRC) - Americas Regional Office (ARO); Country Cluster Delegation (CCD) - 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: Some key government agencies: Ministry of Public Health Wellness and the Environment, Ministry of Education, District Councils (quasi-local government functions), Solid Waste Management (collection and disposal of refuse and management of landfills), National Parks (management and upkeep of heritage sites). Some key non-government actors: Environmental Attackers (based in Union Island, Southern Grenadines), Action Bequia (Northern Grenadines), Callilaqua Fishermen Cooperative, Fisher-folks of Union Island and Clair Valley.	
The Saint Vincent and the Grenadines Red Cross spent a total of 129,222 CHF. The remaining balance of 45,817 CHF will be returned to the Disaster Relief Emergency Fund.	
<i>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, Blizzard Entertainment, Mondelez International Foundation, Fortive Corporation and other corporate and private donors. The IFRC, on behalf of the SVGRC, would like to extend thanks to all for their generous contributions.</i>	

[<Click here for the final financial report and here for the contact information.>](#)

A. SITUATION ANALYSIS

Description of the disaster

In the wider Caribbean, Dengue fever is endemic to St. Vincent and the Grenadines. The mosquito-borne disease usually appears around the beginning of the rainy season annually, with average laboratory-confirmed cases of between 12 to 20. Usually, cases disappear by around August. In 2020 however, quoting Iwitness News (a local online newspaper), August 27th, 2020, the media reported that "The Ministry of Health, Wellness, and the Environment on Thursday warned of an above-normal increase in dengue cases, and it was taking all necessary steps to prevent a severe outbreak of dengue fever in St. Vincent and the Grenadines." According to a Ministry's

press release on the 28 September 2021¹, reported that the country recorded 432 laboratories' confirmed cases and four deaths, prompting the Ministry to issue a warning "This increase is not typical for this period, and Vincentians are urged to take the requisite precautions to prevent further spread of the illness." The number of confirmed cases continued to climb reaching 1,790 in January 2021, with 8 deaths. Youths and adolescents seem to be the most affected age groups, and persons in the 5-14-year age group account for most cases (40.57% on November 21st).

While responding to the worst Dengue outbreak in decades, the government and people of St. Vincent and the Grenadines also have to grapple with two other emergencies of far-reaching public health significance – COVID-19 and the effusive eruption of the La Soufriere volcano (which started erupting in December 2020).

As a result of the assessment work done by the team of volunteers working along with the vector control officers, the SVGRC was able to identify barrels as one of the leading mosquito breeding sites for the *Aedes aegypti* mosquito. This information provided the basis for the "Safe Barrel Initiative." A thorough review of the epidemiological report also helped to inform the rollout of the DREF.

Summary of response

Overview of Host National Society

The National Society has maintained excellent working relations with key government ministries and departments, CDRTs, community groups, and other key stakeholders throughout the reporting period. These relationships have greatly aided in the execution and acceptance of the project. Additionally, in keeping with the NS's policy of continuity, the DREF has been able to build on the platform laid down by the recently concluded Zika project. Indeed, one component of that project – the Healthy Schools Programme – has been given pride of place (in that it is continued) under this project. During the DREF, the NS also had to respond to two other public health emergencies – COVID-19 and an effusive volcanic eruption.

In summary, the following actions formed the basis of the NS response:

- Engagement of key stakeholders
- Provision of volunteers to assist the vector control unit in its ongoing vector control programme
- Production and distribution of risk communication materials – posters, brochures, greeting cards
- Clean up campaigns
- Expansion of the healthy school environment programme. Litter bins; jackets and badges (for the litter monitors)
- Creation of green spaces
- Distribution of Nets to Preschools, Day Cares centers and household
- Distribution of PPEs to Volunteers
- Safe barrel initiative
- Production of demonstrative video
- Production of PSAs
- Painting of mural
- Lessons learned workshop

Overview of Red Cross Red Crescent Movement in country

The IFRC Americas Regional Office (ARO) is not directly represented in Saint Vincent and the Grenadines. Still, through its Country Cluster Support Team (CCST) office based in Trinidad and Tobago, IFRC closely supports the NS. In the past, it has also been supporting the SVGRC with the implementation of the health project linked with the 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 closely supports the SVGRC through several disasters and crisis preparedness projects. In particular, the PIRAC is carrying out a project dedicated to supporting SVGRC to stockpile emergency Non-Food Items (1,700 mosquito nets, etc.)

¹ [Ministry of Health, Wellness and the Environment. Press Release – Dengue Outbreak 28 September 2020.](#)

and train NS teams in Emergency Response Logistics and Distribution. The PIRAC also assists SVGRC in its COVID-19 response activities (PPE supply, public awareness, food, and hygiene distribution, etc.)

CCD and PIRAC facilitated the planning of the response and development of the emergency plan of action (EPoA) for the dengue fever outbreak in support of the National Society. Per agreement between the IFRC and the French Red Cross, the PIRAC acts as a key Disaster Management mechanism for the Caribbean sub-region, supporting the Caribbean National Societies within the IFRC Regional Response Disaster and Crisis management system, coordinated and led by the IFRC.

Overview of non-RCRC actors in country

The Vector Control Unit, within the Ministry of Health Wellness and the Environment, is the government agency principally tasked with controlling vectors, including the mosquito. The Unit engages in several activities and programmes to fulfil this mandate. These include, among other things, the inspection of premises, fogging, enforcement of public health regulations. The Unit's efforts are augmented by the involvement and support of various community-based organizations and agencies from time to time.

Some key government agencies include: District Councils (quasi-local government functions), Solid Waste Management (collection and disposal of refuse and management of landfills), National Parks (management and upkeep of heritage sites). Some key non-government actors include Environmental Attackers (based in Union Island, Southern Grenadines), Action Bequia (Northern Grenadines), Callilaqua Fishermen Cooperative, Fisher-folks of Union Island and Clair Valley.

Needs analysis and scenario planning

By and large, the needs assessment was accurate. However, as the activities were rolled out, a few adjustments had to be made. For example, the cleanup campaigns focused mainly on removing white goods and other useless receptacles that collect water and create mosquito breeding sites. The nets are best suited for use on cribs. As a result, the initial sets of nets were delivered to preschools and daycare centers that carry cribs. The safe barrel initiative was introduced following household assessments. Three hundred households were selected as beneficiaries. The beneficiaries were identified by volunteers working along with members of the vector control unit. On the recommendation of the Senior Environmental Health Officer with responsibility for vector control, one community (Francois) in the Pembroke Health District was singled out for special treatment. 32 households in this community had barrels worked. The health authority gave the following reasons for the recommendation:

- The poor, rural, farming community where a lot of the households do not have pipe-borne water, as a result many store their water in barrels; and
- One of the very first cases in the current dengue outbreak is a resident of the village.

Risk Analysis

The risk involved in the execution of the project can be summarized as follows:

- Volunteers, staff and others associated with the project ran the risk of also becoming infected with the dengue virus. All were briefed on the safety measures to be taken.
- COVID-19 also posed a clear and present threat to all. To minimize this threat, the NS provided PPEs and encouraged volunteers to follow all COVID-19 protocols. When COVID-19 cases spiked in late December, the National Society discontinued all activities that required mass gatherings.

B. OPERATIONAL STRATEGY

Community Assessment

During the period November 2020 to February 2021, five volunteers were attached to the Vector Control Unit. Under the guidance of the staff, they carried out inspections on premises aimed at identifying mosquito breeding

sites. Detailed information was recorded on assessment sheets which vector control officers could take appropriate action. Two assessments process surveyed information from 3,376 households.

Cleanup Campaigns

Cleanup campaigns were carried out under two rubrics: (1) community cleanup and (2) area cleanups. This decision was taken following a meeting with two of our important stakeholders – the Solid Waste Management Unit and the Environmental Health Department:

- **Community cleanup.** These were carried out in all nine health districts and took the form of a household response. The cleanup targeted white goods (e.g., old fridges and washing machines), bottles and cans, and any other receptacles that can hold water and create mosquito breeding sites. People got involved by responding to the message, which asked them to identify these potential breeding sites on their premises and bring them out by the side of the road to be carted away. Each person was asked to encourage his/her neighbour to ensure that they rid their premises of these breeding sites. The communities were notified of their specific cleanup days by a team driving around announcing the use of a bullhorn.
- **Area cleanup.** This consists of having groups of persons from a community cleaning public space. The groups involved were community groups and fisher folks. The spaces identified include public spaces where people congregate for pleasure and livelihood (e.g., on the waterfront where fisherfolks ply their trade, public space where people gather, and public waterways choked with debris). Members of the community were provided with the tools to clean and maintain these areas. Fisherfolks were able to identify upturned derelict boats as the major breeding sites on the waterfront. Those that were not carted away were turned down.

Safe Barrel Initiative

Before the DREF, and confirmed by the assessment mentioned above, the Vector Control Division (within the Ministry of Health) had identified water barrels as one of the leading causes of mosquito (particularly the *Aedes aegypti*) breeding in the country. During the clean-up campaign on Bequia, the team visited a property where it was observed that the householder not only had his barrels covered (with screening material), but he also had them joined together with plumbing works, completed with an attached faucet. In this way, the water was easily accessible and did not risk taking the cover off and forgetting to replace it. This gave birth to the Safe Barrel Initiative. It is a variation from the original project.

Number of households who got barrels worked on (this includes covering, affixing tap, and in some instances connecting or linking together): 300

Breakdown: Northern Grenadines (Bequia) 70.

Southern Grenadines (Union Island) 50 & Myreau 20.

St. Vincent Health Districts, Pembroke 40, Callilaqua 35, Cedars 15.

Georgetown 10, Kingstown 45 and Marriaqua 15.

The rationale for the breakdown:

1. On St. Vincent we targeted the health districts that had the most cases.
2. Although the cases in the Grenadines were not as high, because the Grenadines depend solely on the harvesting of rainwater for meeting their needs, islanders tend to keep lots of barrels.



Bequia, St. Vincent and the Grenadines: In some areas of Bequia, where people rely on rainwater stored in barrels in the dry season, there can be outbreaks of dengue as mosquitoes can use uncovered barrels to breed. St. Vincent and the Red Cross is working with communities to cover and tap barrels to help prevent the spread of dengue. Source: SVGRC.

Mass Communication Campaign & Promotion

This consisted of several PSAs developed and carried on several media platforms, such as the Agency for public information²; the production of demonstrate video, posters, brochures, fliers, painting of mural and face masks. One of the main messages was that Dengue fever prevention is a community activity³. The NS Facebook page also shared images of the GO Bag, a popular item promoted by the RC, which prepares families for the country's three main threats, Dengue Fever, COVID-19, and the Volcanic Eruption.

Net and Repellent Distribution

Long-lasting insecticidal nets and repellents were distributed to selected households in nine health districts, pre-schools, and daycare centers. Volunteers, staff, and nurses did distribution to vulnerable clients at anti-natal and child health clinics.

Integration

The DREF was able to integrate the work carried out on a previous project (Zika) as an activity – the Healthy Schools' programme. This activity saw the active involvement of primary school students in the improvement and maintenance of their school environment. Integration was also demonstrated by linking activities to the COVID-19 and volcanic eruption response.

Capacity Building.

Volunteers and staff went through the exercise of video production and prepared news stories under Agill Hill's tutelage. This is a skill that the NS has long been craving. With this new skill, volunteers are now better equipped to document the work and help with the visibility of the NS.

Green Space

The concept of clearing and beautifying vacant parcel of land. The land is often derelict – overgrown vegetation used as dumping ground. With the involvement of several community groups and government, agencies work was done on these.

Lessons Learned Workshop

The lessons learned workshop was completed on 30 March. It was facilitated by Heath Promotion Officer Ms. Shanika John, MPH. Participants were drawn from a wide cross-section of persons impacted by the DREF – volunteers, staff, beneficiaries, community leaders, skilled workers, service providers, community nurses, public health, and vector control personnel. The report can be accessed [here](#).



² <https://fb.watch/vvBrxFSR8/>

³ <https://fb.watch/6D73mm1ezc/>

Epidemiological Comparison before and after the DREF intervention

The table below shows dengue infections by health district⁴. This table was presented at the application for the DREF. Confirmed cases peaked at 1,790 in January, with 8 deaths. Comparisons can be made between this table, and the latest obtained from the Ministry and presented immediately following table one. Clearly, there has been a significant reduction in laboratory-confirmed cases. While this report cannot lay claim to this success, the intervention has contributed in some way to the declining cases.

TABLE 1 - TABLE SHOWING DENGUE INFECTIONS BY AGE GROUP IN ST. VINCENT AND THE GRENADINES, EW 1-46, 2020

HEALTH DISTRICT	NO. OF CASES	PERCENTAGE	RANK
CALLIAQUA	275	17.01%	3
CEDARS	80	4.95%	7
CHATEAUBELAIR	138	8.53%	4
GEORGETOWN	127	7.85%	6
KINGSTOWN	325	20.10%	2
MARRIAQUA	131	8.10%	5
NORTHERN GRENADINES	73	4.51%	8
PEMBROKE	337	20.84%	1
SOUTHERN GRENADINES	24	1.48%	9
UNKNOWN	107	6.62%	
TOTAL	1617	100.00%	

Table 2. Suspected Dengue cases by Health Districts: January – March 12th, 2021 (Ministry of Health Wellness and the Environment, unofficial report). The unknown category refers to patients whose addresses were not recorded (often happens with private patients). Therefore, the health district could not have been ascertained.

DISTRICT	CASES PER DISTRICT	PERCENTAGE
Pembroke	11	26.8%
Kingstown	11	26.8%
Callilaqua	06	14.6%
Marriaqua	06	14.6%
Cedars	01	02.4%
Chateaubelair	01	02.4%
Northern Grenadines	01	02.4%
Southern Grenadines	01	02.4%
Unknown address	03	07.3%
Total	41	100%

⁴ Source: Ministry of Health

C. DETAILED OPERATIONAL PLAN



Health

People reached: 8,780 people (1,756 families)

Outcome 1: The immediate risks to the health of affected populations are reduced

Indicators:	Target	Actual
No. families reached	1,000	1,756

Output 1.1: The health situation and immediate risks are assessed using agreed guidelines

Indicators:	Target	Actual
No. of assessments carried out jointly with government	2	2

Health Outcome 4: Transmission of diseases of epidemic potential is reduced

Indicators:	Target	Actual
No. families reached	1,000	1,756

Output 4.1: Community-based disease control and health promotion is provided to the target population

Indicators:	Target	Actual
No. of awareness-raising sessions at the community level	6	11

Output 4.2: Vector-borne diseases are prevented

Indicators:	Target	Actual
No. of long-lasting insecticidal net distributed	3,000	3,000
No. of water storage containers made safer (households benefiting from the Safe Barrel Initiative)	300	300
No. of families receiving repellent	1,000	1,000
No. of community -based clean-up campaigns carried out	9	11

Output 4.6: Improved knowledge about public health issues among the identified target population and areas

Indicators:	Target	Actual
# of awareness-raising sessions at the community level	6	11

Narrative description of achievements

Joint assessments. The initial assessment was a joint (with Ministry of Health) assessment of the epidemiological report. This was followed up by continuously reviewing the weekly worksheet of the volunteers attached to the Vector Control Unit. Their activity consisted of inspecting the premises for potential and mosquito breeding. Two assessments were carried out in a total of 3,376 households. In addition, other assessments were carried out - assessment of open areas to determine the nature and scope of open spaces for cleanup.

Safe Barrel Initiative. Before the DREF, and confirmed by the assessment mentioned above, the Vector Control Division (within the Ministry of Health) had identified water barrels as one of the leading causes of mosquito (particularly the *Aedes aegypti*) breeding in the country. Within the confines of the DREF, we set a target of 300 households to screen, connect (on request) and affix a faucet. This target was achieved.



SVGRC staff talks about having a GO bag ready in case of emergency. Source - SVGRC.



SVGRC volunteer, Husnecher Edwards, speaks with a resident during a distribution of mosquito repellents and nets to curb the spread of dengue in Magum/Overland. Source: SVGRC.

Mass Communication campaign & promotion.

This consisted of several PSAs (4) developed and carried on several media platforms; production of demonstrative video (promoting the safer barrel concept); production of posters (300), 24 by 48 inches in dimension and made of corrugated plastic, which can therefore withstand weather conditions; brochures, flyers, and production of 200 face masks.

Net and Repellent Distribution.

Long-lasting insecticidal nets (3,000 – 3 per household) and repellents (1,000) were distributed to the 1,000 selected households in nine health districts, pre-schools, and daycare centers. Volunteers did distribution and staff nurses (vulnerable clients at anti-natal and child health clinics).

Clean-up Campaigns: Community clean-ups were carried out, with the necessary safety precautions taken due to the increase in the number of confirmed COVID-19 cases. A total of 11 clean-up campaigns were carried out over the 4-month period, in communities in St. Vincent as well as the other Grenadine islands. The NS identified that a major contributing factor was the breeding of mosquitoes in peoples' backyards, due to the accumulation of 'white waste' – old refrigerators, stoves and other appliances. As such, some of the days were organized, where community members were asked to take these waste matters to the curb and then cleared away by trucks to the appropriate dumping site. In addition to the clean-ups, some Green Spaces were instituted as per the description below.



SVGRC volunteer and member of Community removing targeted items during the clean-up. Source: SVGRC.

Creation of Green Space.

The work for the creation of green spaces in 5 communities – Paget Farm (Northern Grenadines Health District), South Union (Seders Health District), Kingstown (Kingstown Health District), Chateaubelair (Chateaubelair Health District), Owia (Georgetown Health District).

Community Awareness Sessions:

These sessions were held in an effort to support the vector control mechanisms being implemented across the various communities. As such, awareness sessions were held on or leading up to days for clean-ups, drum proofing or the creation of green spaces. In keeping with COVID-19 protocols and need to maintain social distancing, the SVGRC utilized the services of a town-crier, in addition to handing out flyers and brochures. Meetings were held with authorities and community leaders to review progress of the actions and coordination of joint work. The SVGRCs also collaborated with Ministry of Health to ensure a coordinated and cohesive prevention campaign.

Challenges

- The COVID-19 pandemic response caused several constraints to this operation. When the project got started in November, it did so amidst COVID-19. This presented a challenge, especially for activities that required meeting people face to face. This challenge increased significantly in later December 2020, when COVID-19 cases in the country spiked, reaching over 100 cases per day. As a result, adjustments had to be made, particularly to planned community activities. For example, community education programmes had to be discontinued. When COVID-19 cases spiked to reduce the contact of volunteers with, among themselves and the public, and on the recommendation of the Community Nursing Service, it was recommended that the further distribution of nets and repellents be done at the anti-natal and child health clinics.
- Constraints in engaging and coordinating multiple stakeholders. Throughout the project's life, the operation team engaged with several stakeholders ranging from partnering agencies (e.g., Ministry of Health, the Solid Waste Management Unit, and NGO) to service and goods providers. Sometimes the effort of coordination delayed activities.
- **Eruption of La Soufriere:** The volcano began erupting (effusively) in late December. This had the immediate effect of increasing the workload of the NS, as we had to prepare for the eventuality of an explosive eruption. This led to a slowing down of the pace of activities. It also meant that activities earmarked for communities in the red and orange zones had to be re-evaluated. Unfortunately, three of the five green spaces identified to be included at the beginning were in the red and orange zones – Chateaubelair and Owia (red) and South Union (orange) and activities were stopped in those areas.
- **Late receipt of nets and repellents:** These items did not arrive until sometime in January. As a result, the same distribution to households started very late, based on the project's timeline. The initial net distributions began in November utilizing stowed stock. These were distributed to preschools and daycare centers.
- **Difficulty accessing information:** Accessing pertinent information such as epidemiological updates, especially from the Ministry of Health, proved to be difficult at times.
- **Procurement difficulty:** Procuring materials sometimes proved to be quite a challenge. That is mainly because one vendor could not be provided what was planned. This meant shopping at several vendors.

Lessons Learned

- Some stakeholders felt they were not sufficiently involved in the process. Commitment was made to engage all stakeholders (including volunteers) at the most appropriate and timely stages of any future exercise.
- The activities with the most comprehensive community participation – the safe barrel initiative and the community clean-ups (particularly the targeting of white goods) – have been identified as the most significant impact. Indeed, a good lesson for future planning.
- The nets are difficult to install. One staff nurse demonstrated how she instructed clients on how to make the best use of them.
- Persons felt that there could have been more visibility in the media.
- The importance of involving the Grenadines. Residents in the Grenadines were particularly pleased that they were included as beneficiaries. Residents there always feel they are left on the periphery.
- Engaging multiple stakeholders (with different expectations and demands) can be very challenging. The NS must therefore be constantly aware of this reality and act accordingly.

Strategies for Implementation

S1.1: National Society capacity building and organizational development objectives are facilitated to ensure that National Societies have the necessary legal, ethical, and financial foundations, systems and structures, competencies, and capacities to plan and perform

Output S1.1.4: National Societies have effective and motivated volunteers who are protected

Indicators:	Target	Actual
# PPE kits distributed to volunteers	100	100

Output S2.1.3: NS compliance with Principles and Rules for Humanitarian Assistance is improved

Indicators:	Target	Actual
# of community feedback mechanisms in place	1	1
# of lessons learned workshops/exercise conducted	1	1

Progress Towards Outcomes

PPE Kits distributed to volunteers. Community clean-ups were planned with the necessary safety precautions taken due to the increase in the number of confirmed COVID-19 cases. A total of 100 PPE kits were distributed to volunteers.

Community feedback mechanisms in place. Under the CEA component, the SVGRC conducted Knowledge, Attitudes, and Practices (KAP) Assessments about Dengue fever and behaviours and a satisfaction survey after distributions were completed. The National Society also designed a series of public health posters building on the COVID-19 messaging to engage the public about Dengue fever, a severe and real threat. Additionally, messages on social media integrating COVID-19, Dengue, and disaster were published. The National Society encouraged people to pack a GO bag containing necessary items, including personal hygiene supplies; and protection items for dengue (mosquito skin repellent) and COVID-19 (face mask and hand sanitizer). The arrival of a CEA Delegate on the island helped the CEA approach and built on NS capacity in this area.

Conduct Lessons Learned Workshop. This activity was carried out on 30 March. The workshop was facilitated by Ms. Shanika John, MPH, and attended by a broad cross-section of persons impacted. The report can be accessed [here](#).

D. Financial Report

See Annex.

Contact information

Reference documents

Click here for:

- [DREF Plan of Action](#)
- [DREF Operation Update no. 1](#)

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

In the Saint Vincent and the Grenadines Red Cross

- Harvey Farrell: harveyericfarrell@gmail.com

In the IFRC Port of Spain Country Cluster Delegation:

- Ariel Kestens, Head of Country Cluster Delegation, ariel.kestens@ifrc.org
- Nasir Khan, Programme and Operations Manager, nasir.khan@ifrc.org
- Tanesha Thompson, Programme Manager, tanisha.thompson@ifrc.org
- Rhea Marie Pierre, Disaster Preparedness Coordinator, rhea.pierre@ifrc.org

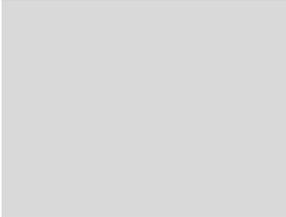
In IFRC Americas Regional Office:

- Roger Alonso, Head of Disaster and Crisis Department: Roger Alonso, roger.morgui@ifrc.org
- Felipe Del Cid, Continental Operations Coordinator for Disaster and Crisis Department; email: felipe.delcid@ifrc.org
- Susana Arroyo, Communications Unit Coordinator for the Americas; email: susana.arroyo@ifrc.org
- Maria Larios, Planning, Monitoring, Evaluation, and Reporting Manager; maria.larios@ifrc.org

For IFRC Resource Mobilization and Pledges support:

- Head of Partnerships and Resource Development: Sandra Romero, sandra.romero@ifrc.org

For In-Kind donations and Mobilization table support:

- 
- Regional Logistics Coordinator: Mauricio Bustamante, mauricio.bustamante@ifrc.org

In IFRC Geneva:

- DREF Senior Officer: Eszter Matyeka, eszter.matyeka@ifrc.org
- Operations Coordination Senior Officer: Antoine Belair, antoine.belair@ifrc.org

How we work

All IFRC assistance seeks to adhere the **Code of Conduct** for the International Red Cross and Red Crescent Movement and Non-Governmental Organizations (NGO's) in Disaster Relief, the **Humanitarian Charter and Minimum Standards in Humanitarian Response (Sphere)** in delivering assistance to the most vulnerable, to **Principles of Humanitarian Action** and **IFRC policies and procedures**. 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

Selected Parameters			
Reporting Timeframe	2020/11-2021/07	Operation	MDRVC004
Budget Timeframe	2020/11-2021/03	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 18/Aug/2021

All figures are in Swiss Francs (CHF)

MDRVC004 - St Vincent & Grenadines - Dengue 2020

Operating Timeframe: 02 Nov 2020 to 31 Mar 2021

I. Summary

Opening Balance	0
Funds & Other Income	175,039
DREF Allocations	175,039
Expenditure	-129,222
Closing Balance	45,817

II. Expenditure by area of focus / strategies for implementation

Description	Budget	Expenditure	Variance
AOF1 - Disaster risk reduction			0
AOF2 - Shelter			0
AOF3 - Livelihoods and basic needs			0
AOF4 - Health	123,434	89,597	33,836
AOF5 - Water, sanitation and hygiene	18,105	11,312	6,793
AOF6 - Protection, Gender & Inclusion			0
AOF7 - Migration			0
Area of focus Total	141,539	100,909	40,629
SFI1 - Strengthen National Societies	1,598	199	1,398
SFI2 - Effective international disaster management	3,195		3,195
SFI3 - Influence others as leading strategic partners	28,708	28,113	595
SFI4 - Ensure a strong IFRC			0
Strategy for implementation Total	33,501	28,312	5,188
Grand Total	175,039	129,222	45,817

DREF Operation

Selected Parameters			
Reporting Timeframe	2020/11-2021/07	Operation	MDRVC004
Budget Timeframe	2020/11-2021/03	Budget	APPROVED

FINAL FINANCIAL REPORT

Prepared on 18/Aug/2021

All figures are in Swiss Francs (CHF)

MDRVC004 - St Vincent & Grenadines - Dengue 2020

Operating Timeframe: 02 Nov 2020 to 31 Mar 2021

III. Expenditure by budget category & group

Description	Budget	Expenditure	Variance
Relief items, Construction, Supplies	108,100	85,596	22,504
Construction Materials		304	-304
Clothing & Textiles	9,000	10,909	-1,909
Water, Sanitation & Hygiene	38,400	46,137	-7,737
Medical & First Aid	4,200	4,177	23
Teaching Materials	11,500	22,434	-10,934
Other Supplies & Services	45,000	1,636	43,364
Logistics, Transport & Storage	28,620	9,371	19,249
Distribution & Monitoring	11,000	2,939	8,061
Transport & Vehicles Costs	11,620	5,228	6,392
Logistics Services	6,000	1,205	4,795
Personnel	14,550	22,441	-7,891
National Staff		716	-716
National Society Staff	11,400	19,085	-7,685
Volunteers	3,150	2,641	509
Workshops & Training	2,486	1,869	617
Workshops & Training	2,486	1,869	617
General Expenditure	10,600	2,057	8,543
Information & Public Relations	3,000	767	2,233
Communications	6,300	779	5,521
Financial Charges	1,300	511	789
Indirect Costs	10,683	7,887	2,796
Programme & Services Support Recover	10,683	7,887	2,796
Grand Total	175,039	129,222	45,817