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HEALTH CLUSTER BULLETIN

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Photo: WHO/Aphaluck Bhatiasavi

HIGHLIGHTS

TYPHOON YOLANDA

- A comprehensive stock-take of the available maternal and child health services, facilities and human resource in the disaster affected areas of Regions VI, VII and VIII is currently under way. 20 facilities from the provincial, district, and barangay level and rural health units across Region VIII were assessed so far.
- In Eastern Samar the provincial health office, the provincial veterinary office, the department of health and WHO are implementing measures in response to 3 human rabies cases (1 in municipality of Oras, 2 in municipality of Dolores).
- As of 15 February, a total of 15,683 suspect measles cases were reported nationwide since the beginning of 2014. An expanded catch-up Measles Immunization Campaign was conducted in January and February 2014 in the National Capital Region, Region III and Region IVA.
- A new National Mental Health Program is being developed and a national mental health planning meeting will be organized on 26 – 28 March 2014.

ZAMBOANGA CONFLICT

- According to the Protection Cluster, about half of the internally displaced people from the September 2013 conflict in Zamboanga City have returned to their places of origin.
- A training workshop on the management of Severe Acute Malnutrition was conducted based on the Philippine Protocol on the Integrated Management of Acute Malnutrition.

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TYPHOON YOLANDA SITUATION OVERVIEW



16 078 181
AFFECTED



4 095 280
DISPLACED



28 626
INJURED



6 245
DEATHS



1 039
MISSING

Source: National Disaster Risk Reduction Management Council (NDRRMC) of the Philippines

The Department of Social Welfare and Development (DSWD) expects to finish the transfer of evacuees to the bunkhouses in Tacloban on or before 15 March 2014. More than a thousand families in Tacloban City were already relocated to the newly constructed bunkhouses located at motocross, Abucay and NHA Sagkahan.

As of 4 March 2014, power supply has been restored in 155 out of 196 barangays in the municipalities of Palo and Babatngon and in Tacloban city.

In an effort to enhance coordination between Local Government Units and international agencies, DSWD is initiating monthly coordination

meetings between mayors and aid agencies working in their municipalities in Eastern Samar. The first such meeting was held in General Macarthur on 6 March 2014 at the Municipal Hall, the second was held in Giporlos on 12 March 2014.

In Cebu, a roundtable discussion was held with twelve towns represented by their mayors and councillors and the Resilience Taskforce Coordinator, Baltz Tribunalalo, on the main learnings from Typhoon Yolanda related to Disaster Risk Reduction. The Resilience Taskforce was established by the Governor of Cebu, Hilario Davide III, with the mandate to engage local communities, the private sector and other

sectors of the community as his province recovers from the November 2013 disaster.

A technical working group was formed for the formulation of the Tacloban City Health Plan for the immediate, medium and long term.

An Inter-cluster Advisory to the Humanitarian Country Team on the provision of assistance in proposed “no dwelling zones” was published on 13 Feb 2014 and can be accessed online under:

<https://philippines.humanitarianresponse.info/system/files/documents/files/Advisory%20Note%20-%20No%20Dwelling%20Zones.pdf>

RESPONSE

Health care facilities

The coordination of partners in the process of rehabilitation of health facilities continues to be one of the main activities in all the Health Cluster Hubs. Discussion and dialogue is on-going and partners continue to commit to provide support to the rehabilitation of the individual facilities. However gaps remain, in particular, but not only, on the barangay level.

In Western Leyte, the full renovation of the Kananga hospital was completed and a handover ceremony was conducted, presided by the Regional Director of the DOH Dr. Llacuna on 6 March 2014. A Memorandum of agree-

ment was signed between Mercy Malaysia and the Ormoc District hospital chief on the establishment of an Intensive Care Unit in the hospital.

In Tacloban, the full rehabilitation of the Sagkahan District Health Center was completed on 13 March 2014 and the rehabilitation of the Women's Health Clinic in Maras Baras was completed on 15 March 2014. A solar fridge was installed at the Carigara Rural Health Unit.

Partners and Foreign Medical Teams

As of 10 March 2014, there are now 8 foreign medical teams operating in Regions VI, VII and

VIII. Six teams provide basic outpatient care (type I) and 2 teams (MSF Belgium in Guiuan and MSF France in Tacloban) provide more advanced health services including surgeries (type II).

Surveillance and communicable disease control

Highlights from the EWARN report is as below. For more in-depth information please refer to the weekly EWARN report that is available online under:

http://www.wpro.who.int/philippines/typhoon_haiyan/reports/en/index.html

This week, 31 health facilities reported 9,087 total consultations in typhoon-affected areas of Region VI and VIII to SPEED.

Acute respiratory infection accounted for 40% of total consultations, most among SPEED conditions reported in the current reporting period.

The Province of Eastern Samar reported 5 new suspected mea-

sles cases bringing the total number of suspected measles cases reported from 16 municipalities between 11 December 2013 and 7 March 2014 to 106. A measles immunization campaign targeting children under 5 years of age and a door to door mop-up immunization are still ongoing in the province.

One death from suspected meningococemia was reported by

the Regional Epidemiology and Surveillance Unit (RESU) from the Eastern Visayas Regional Medical Center. A team from RESU and the Provincial Epidemiology and Surveillance Unit conducted the necessary public health actions, including epidemiological investigation, meningococcal prophylaxis to immediate contacts of the case and community health education.

Table 1: Summary of SPEED Reporting in Typhoon Yolanda affected Areas 2 – 8 March 2014

Region	Provinces (#)	Municipalities (#)	Health Facilities and Reporting Sites (#)
VI	1	3	4
VII	0	0	0
VIII	2	35	27

NCR, region III and IVA Measles situation update

As of 15 February, a total of 15,683 suspect measles cases were reported nationwide since the beginning of 2014. The distribution of the cases varied among the seventeen regions. More than 80% of the cases were reported from the National Capital Region (NCR; 7,005), Region IVA (3691) and Region III (1946). A total of 3,434 cases were confirmed by a positive laboratory test (1,925) or by an epidemiological link with another measles case (1,509). Among the cases reported from NCR, 30% were laboratory confirmed (1,079) or had an epidemiological link (992). The age of confirmed cases ranged from 1 month to 58 years, however 34% belonged to the age group 1 - 4 years. Among the confirmed measles cases eligible for vaccination (> 9 months old; 2,655), 24% were reported to have been previously vaccinated with measles containing vaccine. Twenty three of the confirmed measles cases died (CFR =0.67).

An expanded catch-up measles immunization campaign was conducted in January and February 2014 in the National Capital Region (NCR), Region III and Region IVA in response to rapidly expanding transmission, with the majority of cases under 2 years of age and with a significant number of deaths from complications. 364,367 children (92% of eligible population) were vaccinated in Region III, 687,849 (73% of eligible population) in Region IV-A and 643,714 (76% of eligible population) in NCR. A group of international observers from WHO, UNICEF and US CDC participated in the expanded catch up campaign and carried out a Rapid Coverage Assessment (RCA) with the following conclusion: "Health care staff on all levels have put an incredible amount of work into organizing and implementing this campaign on very short notice. Most of the high-risk areas visited had been well covered by vaccination teams."

Provincial responses, while effective, varied in magnitude and age range. For better coordination, the DOH has developed detailed guidelines on immunization response to future measles outbreaks.

A nationwide mass vaccination campaign will be conducted in September 2014. It will target 11 million children with the age from 9 months to 59 months to be vaccinated with Measles, Rubella vaccine (MR) and 13 million children with the age from birth to 59 months with oral polio vaccine (OPV).

Vaccination and cold chain

In Eastern Samar the provincial health office, the provincial veterinary office, the department of health and WHO are implementing measures in response to 3 human rabies cases (1 in municipality of Oras, 2 in municipality of Dolores). In February 2014 one person was bitten by his unvaccinated dog and 2 persons were bitten by stray dogs. Eastern Samar did not report any human rabies cases in 2011 and 2012. This was most likely due to the high vaccination coverage of 70-80% of the dog population that was achieved during these years. However, the affected municipalities, Oras and Dolores, were not able to reach the target dog vaccination coverage levels in 2013. In 2013 the Eastern Visayas Region reported 3 canine rabies and 4 human rabies cases. 3 of the human rabies cases reported came from the province of Eastern Samar. The Eastern Samar Provincial Health Office (PHO) and the Provincial Veterinary Office (PVO) are leading the support to the affected municipalities in close coordination with the DOH Provincial Health Team Office (PHTO) and the Center for Health Development (CHD) and in close and regular collaboration with WHO. The initial response focused on assisting the municipalities of Dolores and Oras in reconstituting their Municipal Rabies Coordinating Committee, providing orientation to the representatives of the local offices and partners and preparing a workplan to halt the spread of rabies in canine and humans. A meeting of the Association of Barangay Captains (ABC) was held in Dolores and it was agreed to provide support to all indigent human bite cases to enable the

patients to travel to the nearest Animal Bite Treatment Centers (ABTC) if needed. Human Post Exposure Prophylaxis (PEP) vaccines are available free of charge in the ABTCs in the District Hospitals and in the Provincial Hospital. The ABC Officials also agreed to identify 150 volunteers from the 46 barangays to be trained as barangay advocates. 50 of those will also be trained as dog vaccinators. The vaccinators will receive a complete dose of pre-exposure prophylaxis and PEP if bitten with the required vaccines provided by WHO. A communication plan and large scale community information campaign is being prepared for the kick off of the dog registration and vaccination campaign during March and April 2014. During the Municipal Rabies Coordinating Committee (MRCC) meetings in Dolores and Oras, the existing regulations and functions supporting rabies prevention and control were emphasized. On the Barangay level, the vaccination campaigns will be coordinated through Barangay Rabies Coordinating Committees (BRCC), which will be responsible to achieve the target rate of 70 – 80 % of vaccination coverage in the dog population of their respective barangays as well as conducting a comprehensive dog registration campaign and the advocacy of responsible pet ownership practices. 600 dog registry booklets were provided by the DOH Center for Health Development with support from WHO to cover each barangay in the province. On provincial level, a workplan for the mobilization of activities against rabies was prepared. The province is scheduled for mass dog vaccination starting with the Oras and Taft

interlocal Health Zones (ILHZ) before moving to the 3 other ILHZ. Some of the municipalities, that have started their dog vaccination campaigns already are encouraged to continue with those under the supervision of the PVO and PHO and with support from the Provincial Health Team Office. The WHO hub in Borongan will continue to provide strategic support in close coordination with the WHO Country Office in Manila.

Dengue and vector control

In Eastern Samar, there have been 6 reported new cases of suspected dengue in 3 municipalities (Guiuan, Gen. Mc. Arthur and Borongan) between 28 Feb 2014 and 7 March 2014. The “search and destroy” prevention activities are ongoing. An advocacy meeting was done with the attendance of 38 out of 41 Barangay chairpersons. The creation of “dengue brigades” in the barangays was discussed and encouraged during this meeting. DOH teams with trained community volunteers continue to do larvicidal spraying of all health facilities and most of the bunk houses and schools in the priority areas. Partners for the spraying and the search and destroy operations are also recruited through the “cash for work” program of UNDP, ICRC and People in Need.

The Provincial Health office is also implementing bed nets distribution and health education campaigns in coordination with Plan International. 133 families from the Tent City and nearby bunkhouses in Guiuan along with 48 families from Barangays Butok and Lupok received bed nets.

In Tacloban, vector control interventions have been intensified in selected areas, which have reported suspected and confirmed cases of dengue and suspected cases of Chikungunya.

In Western Leyte, dengue fever activities are ongoing and the numbers of suspected cases are declining.

Mental health and psychosocial support (MHPSS)

Over the last weeks, MHPSS training workshops based on the WHO Mental Health Gap Action Programme (mhGAP) Intervention Guide for mental, neurological and substance use disorders in non-specialized health settings were conducted in:

1. Ormoc, facilitated by Medecins du Monde, with participants from Western Leyte (Albuera, Ipil, and San Pablo and Ormoc District Hospital) and Rural Health Units in Carigara and Abuyong (Leyte).
2. Tacloban, facilitated by International Medical Corps, with participants from the RHUs in Burauen, Dagami, Julita, La Paz, Tabon, Dulag, and MacArthur.
3. Eastern Samar, facilitated by WHO, with participants from Balangiga, Lawaan, Giporlos, Quinapondan, Taft, Jipapad, Balangkayan, Llorente, Borongan city, Guiuan, Hernani, Mac Arthur, Salcedo, Mercedes

Preparation of mhGAP trainings to cover the remaining parts of Western Leyte and Eastern Samar are currently ongoing.

Regular coordination meetings of the MHPSS working groups are ongoing in Tacloban, Ormoc, Borongan, Cebu, Bohol and Zamboanga. Dedicated MHPSS 4Ws are continuously updated during these meetings. This is of particular importance for the planning of the transition phase from response to recovery.

A new National Mental Health Program is being developed and a national mental health planning meeting will be organized on 26 – 28 March 2014.

Reproductive Health (RH)

A reproductive health expert from WHO is currently conducting a comprehensive stock-take of the available maternal and child health services, facilities and human resource in the disaster affected areas of Regions 6, 7 and 8. The focus of the stock take is on the Basic Emergency Obstetric and Newborn Care (BEMONC) and Comprehensive Emergency Obstetric and Newborn Care (CEMONC) capabilities of the health facilities that have been affected by Typhoon Yolanda. 20 facilities (including 1 private) from the provincial, district, and barangay level and rural health units across Region VIII were assessed so far. Site visits have been conducted in partnership with the DOH. Nearly all facilities visited are providing basic obstetric care and normal vaginal deliveries. Of the provincial and district hospitals visited, eight are providing emergency obstetric care including caesarean sections. Most facilities are operating with minimum of equipment and supplies. Neonatal capabilities

across the provincial and district hospitals assessed were limited. The hospitals have no capacity at this stage to provide extended respiratory support for sick or premature infants. Further site visits in Ormoc and Verai province and meetings with key stakeholders including representatives from the DOH and NGOs are planned for the stock take.

A Hospitainer / “clinic-in-a-can” emergency maternity unit (See figures 1 and 2) constructed in Balangiga by UNFPA has started operation and caters normal deliveries to date while the health facility is still undergoing completion. Recruitment of staff is currently on-going. The facility will be annexed to the Avelino Duran Memorial Hospital. A second Hospitainer started operation in Palo on 31 December 2013. A total of 52 obstetric procedures including 37 C-sections were performed. Both Hospitainers are expected to operate until June 2014.

Save the Children reports, that between 26 February and 8 March 2014 six reproductive health missions covering 53 out of 54 Barangays in the municipality Alangalong, Leyte were conducted, serving 634 pregnant and 638 lactating women. In Tacloban, 7 youth friendly spaces were established, 166 peer educators were trained and 203 youth volunteers mobilized. An Essential Intrapartum and Newborn Care Training of Trainers will be conducted for 180 midwives from the public and private sector in Iloilo between 1 and 4 April 2014.



Figure 1 and 2: Installation of the emergency maternity unit in Balangiga and view of the fully equipped operating room inside.

Water, Sanitation and Hygiene (WASH) and Environmental Health

The national WASH cluster reports, that it reached 87% of its water targets and 18% of its sanitation targets. 1,240,435 individuals affected by the typhoon have received access to safe water. 5610 temporary and permanent latrines have been constructed for 122,440 individuals, meeting 18% of the targeted 650,000 individuals for sanitation activities. For more information, see the WASH Cluster Response Bulletin under:

<https://philippines.humanitarian-response.info/system/files/documents/files/WASH%20Cluster%20Ty%20Yolanda%20Bulletin%20%233.pdf>

A training workshop on water quality monitoring for Local Government Units was conducted in Cebu City between 3 and 4 March 2014. 40 sanitary inspec-

tors from Bohol and Cebu participated in the training. A similar workshop was conducted for 45 sanitary inspectors from the municipalities of Aklan, Antique, Capiz and Iloilo in Iloilo City between 6 and 7 March 2014. The trainings were facilitated by staff and consultants from DOH, WHO and Manila Water. The UNICEF coordinators for Bohol and Roxas City also attended these two trainings.

Initial field visits for a comprehensive environmental health risk assessment will be conducted by a WHO Consultant in Tacloban, Guiuan and Bohol from 12 March – 9 April 2014.

A training workshop on health care waste management for selected hospitals in Region 8 will be conducted between 20 March and 5 April 2014 facilitated by WHO consultants, DOH staff, and San Lazaro Hospital staff.

Nutrition

Over the previous week, 18,250 children in Region VIII were screened with 30 cases admitted for outpatient treatment and 166 children admitted to targeted supplementary feeding programmes. 2 additional mother and baby friendly tents were set up in Eastern Samar.

A Standardized Monitoring and Assessment in Relief and Transition (SMART) nutritional survey in Region VIII will be concluded on 15 March 2014.

For further information please see the Nutrition Cluster Weekly Update available online under: <https://philippines.humanitarian-response.info/system/files/documents/files/Nutrition%20Cluster%20Weekly%20Dashboard%2012March.pdf>

FUNDING STATUS OF ACTION PLAN

As of 11 March 2014, OCHA has updated the action plan, which is now 52% funded for the health sector (table 2).

Table 2: FUNDING STATUS OF ACTION PLAN FOR HEALTH (US\$)				
Project	Appealing Agency	Amount Required	Funding	% Covered
Merlin & Save the Children Essential Health Services for Preventing Excess Mortality and Morbidity in Typhoon Haiyan affected Population	Save the Children	4707706	800000	17%
Ensuring Access to Reproductive Health Services in the Aftermath of Typhoon Haiyan	UNFPA	10000000	10871062	15%
Provision of emergency health services to typhoon affected populations	WHO	15000000	11871062	79%
Immediate assistance to injured and vulnerable persons affected by Haiyan typhoon in Philippines	HI	240000	237417	99%
Emergency Health care, public health and referral initiatives for displaced and affected persons 'on the move and their vulnerable host communities'	IOM	1810511	431232	24%
Provision of life-saving interventions for health to children 0-59 months affected by Typhoon Haiyan emergency	UNICEF	19000569	21479078	113%
Provision of quality medicines and developing resilience in the supply chain to avoid gaps by strengthening the department of health medicines stock management systems	IHP	806000	488599	61%
Prevent increase in maternal, neonatal and child mortality post disaster through ensuring continuity of services for these more vulnerable groups	Plan	3960422	0	0%
Promoting mental health and psychosocial well-being of populations affected by Typhoon Haiyan	IMC	727961	0	0%
Ensuring the health needs of older people in Typhoon Haiyan	HelpAge International	465000	465000	100%
Health care support for Typhoon Haiyan affected populations	IMC	3865225	0	0%
Enhancing coordination within and outside the health sector	WHO	1816100	0	0%
Surveillance, outbreak prevention and vaccination	WHO	3929850	3135870	80%
Local health system recovery for social and economic protection	WHO	4061800	300000	7%
Delivery of essential health services to meet the immediate health needs of the affected population	WHO	3524500	0	0%
Typhoon Haiyan emergency health response	WV Philippines	400000	400000	100%
Health assistance for disaster affected communities of inland Leyte and coastal Barangays of Tacloban municipalities of Tacloban City, Jaro, San Miguel and Carigara	RI	955500	0	0%
Provision of emergency medical assistance to affected population of the Typhoon Haiyan	MDM France	2700000	0	0%
Saving Women's lives in Typhoon affected provinces through reproduction health	Saude em Portugues	1150800	0	0%
Restoration of basic health package within Concepcion Municipal Health Office area	AAI	310000	0	0%
Sub total for health		79431944	41147776	52%

Source: [http://fts.unocha.org/reports/daily/ocha_R32_A1043___12_March_2014_\(03_01\).pdf](http://fts.unocha.org/reports/daily/ocha_R32_A1043___12_March_2014_(03_01).pdf)

ZAMBOANGA CONFLICT SITUATION OVERVIEW

Return and resettlement of the internally displaced people (IDPs) from the September 2013 conflict in Zamboanga City is ongoing, facilitated through the approved Zamboanga City Roadmap to Recovery and Reconstruction.

According to the Protection Cluster, about half of the IDPs have returned to their places of origin. However, 50,000 IDPs have

been registered as living with host families and over 26,000 IDPs are still in government supported evacuation centers and transit locations.

Of the 26,000 people in evacuation centres, about 50 per cent are from three areas of Zamboanga which city officials have declared as 'no return' zones until the government completes

its reconstruction plan. IDPs who 'informally settled' and indigenous communities such as the Badjaos who are dependent on the sea for livelihood continue to wait for alternative relocation options.

The humanitarian Zamboanga-Basilan Action Plan is currently being revised for extension beyond the end of March 2014.

RESPONSE

Nutrition

In December 2013 the International Committee of the Red Cross (ICRC) conducted an exhaustive tent by tent screening of every child (6 -59 months old) living in Evacuation Centres of Zamboanga City. A rapid Middle Upper Arm Circumference (MUAC) survey with oedema check was done and a questionnaire was handed out to any caretaker who had a malnourished child in order to determine the main causes of malnutrition. The results showed a Global Acute Malnutrition rate (MUAC below 125 mm) of 7.6% and a Severe Acute Malnutrition rate (MUAC below 115 mm) of 2.4% among the screened children. Based on these findings and following requests from medical doctors working in the health facilities of Zamboanga City to be trained on the management of acute malnutrition, WHO, ACF and UNICEF started preliminary discussions with paediatricians and doctors working in the paediatric ward of Zamboanga Medical Centre in mid-February. A training on the management of Severe Acute Malnutrition was con-

ducted by WHO and ACF on 27 and 28 February 2014 based on the Philippine Protocol on the Integrated Management of Acute Malnutrition (PIMAM). The PIMAM Protocol is based on the WHO Guidelines on SAM.

Mental health and psychosocial support (MHPSS)

Preparation for a training workshop based on the WHO Mental Health Gap Action Programme (mhGAP) in Zamboanga and Bohol has been started. The trainings will cover Rural Health Units and hospitals in Zamboanga and Bohol Province.

As the WHO Zamboanga Hub is preparing for transition, local counterparts, specifically the City Health Office, have been empowered to take the lead in the MHPSS Cluster. Together with the preparation for the mhGAP training, which will be conducted in March 2014, a series of recall sessions have been planned to build further capacity among key local resource persons for treatment of clients referred to specialized mental health services.

Surveillance and communicable disease control

In the current reporting week (2 - 8 March) three Barangay Health Stations and one Rural Health Unit reported to SPEED from Region IX (Zamboanga Peninsula).

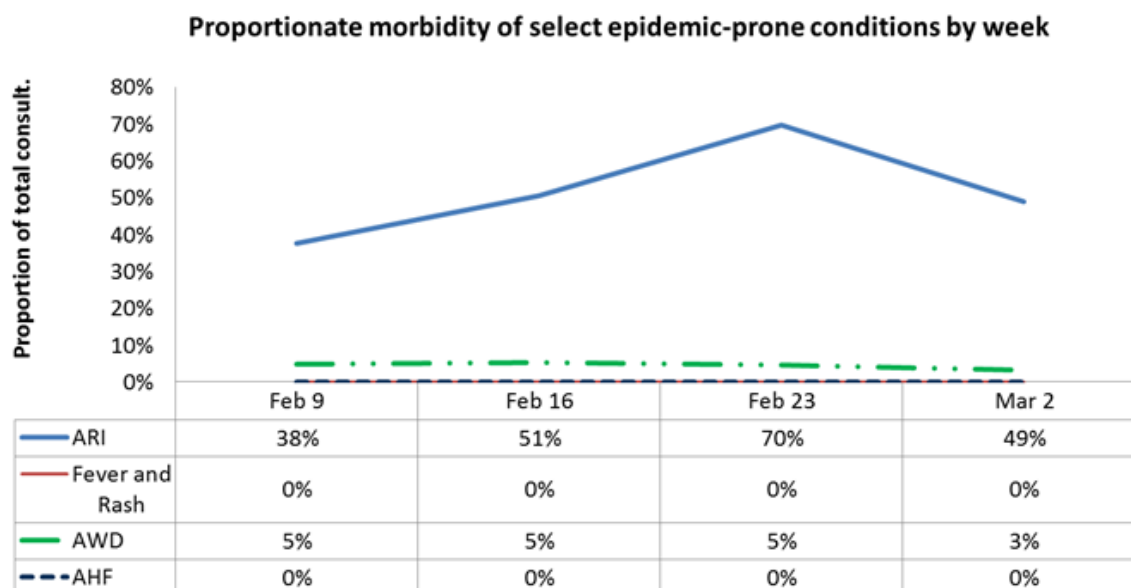
The total number of SPEED consultations increased by 42% from 66 last week to 94 this week.

Leading causes of morbidity include:

- Acute respiratory infection (49%)
- Skin diseases (23%)
- Fever (8.5%)
- Wounds and Bruises (8.5%)
- Acute Watery Diarrhoea (3%)

The Department of Health is now shifting from the SPEED reporting to the routine disease surveillance of Philippine Integrated Disease Surveillance and Response (PIDSR). DOH will still support the City Health Office through epidemiologic investigations and assist on data analysis, as necessary.

Figure 3: Proportionate morbidity of select epidemic-prone conditions by week 2 – 8 February 2014



Reproductive Health

An estimated total of 847 pregnant women and 565 lactating women (with children 0-6 months) are in need of targeted reproductive health services for pre and post-natal health, health promotion, family planning services and adolescent reproduc-

tive health within the evacuation centres, transitional shelters and bunkhouses.

Water, Sanitation and Hygiene (WASH) and Environmental Health

Latest water analysis (7 February) result yielded positive growth

for coliforms in 2 of the 15 tested sites. In the previous week, 2 of the 15 tested sites yielded positive results, but the sites were not identical to this weeks.

On 9 September 2013, fighting broke out in coastal villages of Zamboanga city between a faction of the Moro National Liberation Front and the Armed Forces of the Philippines which spread to the nearby island province of Basilan. The clashes displaced more than 120,000 people during the height of the conflict in the most affected barangays of Kasanyangan, Mariki, Rio Hondo, Santa Barbara, and Santa Catalina in Zamboanga.

From 6 to 10 October, the UN Resident and Humanitarian Coordinator and the Cluster Heads of Agencies held a mission in Zamboanga to gain first-hand observation of the conflict-affected areas and have direct contact with the affected people, the local authorities and humanitarian actors. The mission findings revealed congested conditions inside the evacuation centres and pro-longed displacement are increasing the risk of health and protection issues.

An inter-agency common working space was established on 10 October in Zamboanga as humanitarian partners further scaled up the response. Flooding in early October also worsened the living conditions inside the evacuation centres.

Due to persistent insecurity and lack of humanitarian access, information on approximate needs of displaced people in Basilan remains a significant gap.

DONORS

Major WHO donors: Australia, Canada, Norway, Japan, the United Kingdom and the UN Central Emergency Response Fund (CERF), Russian Federation, Sweden and the United States of America, and from the European Commission Humanitarian Aid and Civil Protection (ECHO).

Health Cluster Partners

National – Manila:

AECID, Americares, Australian Aid, CDN-DART, CFSI, ChildFund, DFID, DOH, FPOP, Handicap International, HuMa, IFRC, IHP-UK, ILO, IMC, IOM, IRC, ISAR-Germany, JICA, MERLIN, MDM, MSF, National Bureau of Investigation, PHE, Philippines Red Cross Society, Relief International, Plan International, Project Hope, PU-AMI, SCI, UNFPA, UNICEF, USAid, US Forces, WHO, World Vision.

Sub-national – Tacloban:

AECID, ACF, ACTED, Action Pompiers Urgence Inlana Vionus, Americares, ARC, ASEAN, ASYA SAR/KYM, B-FAST, AUs, Bethany Hospital, Bomberos Unidos SP, Buddhist Compassion Relief zu Chi Foundation Philippines, Care, Canadian Red Cross, CDRRMO, Child Fund International, Christian Aid, City Veterinary Office, Compassionate Reach International, DFID, Doctors Worldwide Turkey, DOH, DSWD, ECHO, Emergency.LU, Engenderhealth-Visayas Health Project, Helpage International, Ericsson Response, EUCPT, First Relief Fund, First Response Radio, Fortune Blessings Foundation, F POP, Friends of Waldorf Education, Fuel Relief Fund, Family Care, Family Planning Connection, German Embassy, German Red Cross, Globalmedic, GOAL, Good Neighbours Intl., Good People Intl., Handicap International, Heart to Heart International, Help-e.V., HUMEDICA, IEDA Relief, IFRC, International Disaster Relief, International Medical Corps, Internews, INTERSOS, IOM, IsraAid, Israel Relief Coalition, JICA, JICA LEPCON, JICA SMACHS EV Proj., Jordan International Relief, KIHI, KOICA, KUSOG TACLOBAN, Leger Foundation, Magna, Med Central, Medical Team Int'l, MDM France, Medicos del Mundo Spain, Mercy in Action, Mercy Malaysia, Miral Welfare Foundation, Mission Tacloban/RTR Foundation, MSF France, MSF Holland, MSF Spain, MTI, Navis, NNC 8, OCHA, Norwegian Red Cross, Operational Blessings Mission, Oxfam, Phil Health, Philippines Red Cross Society, Plan International, Pompiers Humanitaires France, Post Crisis Counseling Network (HK), PUI France, Regional Office DOH, Relief International, RTR hospital, RTR Mission Tacloban,

Samaritan 119 Korea, Samaritan Purse US, Saude EM Portugues, Save the Children, SC, SCDN, Solidarities International, Spanish Red Cross Society, Swedish Red Cross, Tacloban City Government, Tacloban City Nutrition Office, TOMECO, TGCFI, The Salvation Army, UNDAC, UNDP, UNFPA, UNICEF, USAID, US OFDA, Vodafone foundation, Vounteer for the Visayans, WFP, WHO, WISAR, World Vision.

Sub-national – Cebu:

AmeriCares, ASB Austria, Canadian Emergency Response Unit, Canadian Medical Assistance Teams, CFSI, ChildFund, DOH, Embassy of Israel, Eversly Child Sanitarium, GOAL, Glory Reborn, ICRC, IFRC, IEAD relief, Health Organization of Mindanao w/ Helping Hand relief and Development, International Medical Corps, JICA, Japan Red Cross, LandsAid, Magna Children at risk, Med Japan, The Mentor Initiative, Merlin, MSF, NYC Medics, PNA, Project hope, React Philippines, Samaritan Purse, Samu Sevilla International, SC, SCI, Spanish Red Cross Society, Saint Anthony Mother and Child Hospital, Talisay District Hospital, UNICEF, Vicente Sotto Memorial Medical Centre, WHO, World Vision.

Sub-national – Iloilo:

Access Aid International, ACF, Action Aid International, ADRA, AMERICARES, ANGKLA PORTYLIST, Capiz Medical Society, Child Fund, CRWRC, DoH, Friend of Mar Roxas, ICRC, IFRC, IOM, Lung Centre of Philippines, Metropolitan Hospital, Operation Blessing, Philippine Rural Reconstruction Movement, Professional Regulatory Board of Psychology, Project Hope International Health, NETHOPE, Red Cross Capiz, Regional Health Office Mental Health Team, RN Response Network, Rotary Club, Save the Children, UNDAC, UNFPA, UNICEF, WFP, WHO, World Vision International, Zuellig Foundation.

Sub-national – Guiuan / Borangan:

DOH, Family Organisation of the Philippines, Health in Portuguese, ICRC, IOM, Medical Team International, Norwegian Church aid, PHTO, Plan International, Radio Bakdaw. UNFPA, UNICEF.

Sub-national – Ormoc:

AusAid, Australian Army, CMAT, ChildFund, Clarion Global Response IMAT, COSE, CFSI, COPAP, DOH, HelpAge International, HuMa, IFRC, IsraAid, IRC, Johanniter International Assistance, KMA, Magna Children at Risk, MDM France, MDM Spain, Mercy Malaysia, MSF, OCA, Ormoc City Health Office, Ormoc District Hospital, Philippine Army, Philippines Red Cross, PAC, Pureworks Foundation, Merlin-Save the Children International, SADC-Swiss Humanitarian Aid, Singapore Red Cross, UNICEF, Vestergaard, WHO, World Vision.

Sub-national – Bohol:

UNFPA, Philippines Red Cross Society, UNICEF, MERLIN, IOM, DOH.

Sub-national – Zamboanga:

ACF International, Ateneo de Zamboanga University, Brent Hospital and Colleges, Inc., Camp Navarro General Hospital, City Health Office - Zamboanga City, Community and Family Services International (CFSI), Department of Education IX, Department of Health - Zamboanga Peninsula, Department of Social Welfare and Development IX, Family Planning Organization of the Philippines (FPOP), Holy Rosary Family Center, International Committee for the Red Cross, Katilingban, MERLIN, Office of the City Social Welfare and Development, Philippine Red Cross - Zamboanga Chapter, Philippine Obstetrics and Gynecology Society - Zamboanga Chapter (POGS), POPCOM IX, Save the Children, UNFPA, UNICEF, Western Mindanao State University, Zamboanga City Medical Center, Zamboanga Evangelical Disaster Response Network.

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