

# DREF operation update



International Federation  
of Red Cross and Red Crescent Societies

## Cook Islands: Dengue outbreak

DREF operation n° MDRCK001  
Operations Update n° 1  
2 August 2009

The International Federation's Disaster Relief Emergency Fund (DREF) is a source of un-earmarked money created by the Federation in 1985 to ensure that immediate financial support is available for Red Cross and Red Crescent response to emergencies. The DREF is a vital part of the International Federation's disaster response system and increases the ability of national societies to respond to disasters.

**Period covered by this update:** 21 May to 30 June 2009

**Summary:** CHF 50,000 was allocated from the Federation's Disaster Relief Emergency Fund (DREF) on 22 May 2009 to support the Cook Islands Red Cross Society (CIRCS) in delivering assistance to some 8,000 beneficiaries.

The number of new cases has definitely reduced in Rarotonga in the weeks since the outbreak, but CIRC continues to assess the situation. CIRC staff met with the affected families and their neighbours and shared information about dengue using the information, education and communication (IEC) materials prepared by the national society, distributed together with family dengue vector kits.

It is estimated that over 250 people have benefitted from the family vector kits distributed in Rarotonga, with another 30 kits transported to Mauke and 50 kits on its way to Aitutaki.

CIRC will use the community-based health and first aid approach in delivering the health interventions in the community. This means that the interventions will be based on a community assessment and priorities. The volunteers and staff will also make use of their presence in the community to sensitize and educate the community members on A (H1N1) influenza.

This operation is expected to be implemented in four months, and completed by September 2009. In line with International Federation reporting standards, the Final Report (narrative and financial) will be issued by 30 December 2009.

The European Commission's Humanitarian Aid Office (ECHO) has contributed EUR 26,442 towards the replenishment of the DREF for the allocation made to this operation. The major donors and partners of the DREF include the Danish Red Cross, Irish Red Cross/ Irish government, Japanese Red Cross, Monaco Red Cross/ Monaco government, Netherlands Red Cross/ Netherlands government, Norwegian Red Cross/ Norwegian government, Swedish Red Cross/ Swedish government, Italian government, United Kingdom Department for International Development (DFID), ECHO, OPEC Fund for International Development, and corporate and private donors. Details of all donors can be found [here](#).

The International Federation, on behalf of the Cook Islands Red Cross Society, would like to thank all donors and partners for their generous support to DREF.

[<click here to view contact details, or here for interim financial report>](#)



Cook Islands Red Cross's response to the dengue outbreak included the dissemination of information, education and communication materials through its community-based health and first aid programme. CIRC..

## The situation

The Cook Islands experienced a dengue outbreak in the southern group of islands in late May 2009. With a country population of approximately 13,000, as of 20 May 2009, a total of 994 cases were reported to the health department, with 57 patients admitted to hospital.

**There are no deaths from the dengue outbreak.**

## Coordination and partnerships

The Cook Islands Red Cross (CIRC) is a member of the national disaster risk management council and is working closely with the government and other agencies in-country to respond to the threat. CIRC is working in partnership with the ministry of health, the national emergency task force and the police. At this point there are no international partnerships in place. The International Federation's Pacific regional office provides technical support as needed to the national society, with additional support made available by the Asia Pacific Zone office in Kuala Lumpur if required.

## Red Cross and Red Crescent action

The dengue outbreak has also affected CIRC's blood donor recruitment programme as the laboratory has been requesting for more donors. To address the increased need, CIRC started workplace recruitment of non-remunerated blood donors.

## Progress towards objectives

### Relief distributions (food and basic non-food items)

**Objective: Up to 100 community vector control kits are distributed to support up to 1,800 people in Rarotonga, Aitutaki and Mauke islands**

#### Activities planned:

- Procurement of items for the kits
- Identification and selection of the beneficiaries and communities.
- Development of beneficiary targeting strategy and registration system to deliver intended assistance
- Preparation of the kits and distribute relief supplies and control supply movements from point of dispatch to end user
- Support to the national plan with fuel for cleaning of high risk areas
- Distribution of the kits with appropriate monitoring and evaluation on the relief activities and provide reporting on relief distributions
- Develop an exit strategy

**Progress:** In Aitutaki where 25 cases were reported, 50 family kits were sent to the branch, with another 30 kits sent to the Mauke branch. The branch volunteers will assess the situation and distribute the kits accordingly and provide their report to the national office to be added to the next update. There are no staff in these branches and so the work will be managed by the Executive Committee and volunteers. This is a new experience for CIRC and the national society continues to learn how to improve their services and support to and with volunteers, beneficiaries and community leaders.

The ministry of health re-assessed the dengue outbreak situation and suggested a change of the community kit content, with the recommendation that large misting machines be procured in place of regular liquid sprays. The recommendation was made as the misting machines are more effective while limiting community exposure to large amounts of chemicals. After much discussion with partners including CIRC, the change in the approach of the community vector kits was adopted by the CIRC team. A total of three misters have been purchased, with the fourth to arrive, and these will be used in the outer islands as well. There has not been any spraying in this reporting period as of yet; the ministry of health recommends that community-wide spraying be put on hold as the number of new dengue cases have slowed down.

**Challenges:** There are many vacant lots of land that are not being cleaned either because the landowners are overseas or are not able to clean them properly and completely eliminate mosquito breeding spots. Another challenge includes treating the initial outbreak seriously but without scaring away tourists, with tourism being the biggest industry of the islands. Preventive work and information dissemination has to be done in a sensitive manner so the objectives are met while maintaining calm and the confidence of the tourism sector.

## Emergency health

**Objective:** Up to 200 family vector-control kits<sup>1</sup> are distributed to support up to 1,200 people in Rarotonga, Aitutaki and Mauke islands.

Activities planned: Activities planned:

- Procurement of items for the kits
- Identification and selection of the beneficiaries and communities with the national council
- Preparation and distribution of the kits by the volunteers and stakeholders
- Consultation with community stakeholders
- Dissemination of information
- Fuel support to the national teams in the use of heavy machinery

### Progress:

The ministry of health, after re-assessing the situation, made some recommendations for change of approach with the family vector kits. The project was delivered according to the changes suggested by the ministry of health, where the family vector kits are distributed to the families who have infected persons in their homes. A total of four CIRC staff accompanied ministry of health representatives on environment inspections of the houses where patients were identified with dengue fever. The families were encouraged to clean their yards, get rid of any mosquito breeding spots and to use the items from the family dengue vector control kits. The CIRC staff met with the families and shared information about dengue using the information, education and communication materials (IEC) prepared by the national society. The proper use of the vector kit contents was well explained to the family members, who recommended to CIRC that the kits be given to the families before they get dengue rather than waiting till after they get it. The family dengue vector kits, accompanied by the IEC materials, were distributed to the affected families as well as families in neighbouring houses.

The most positive aspect of the revised approach is that the family is informed of dengue, including how it is transmitted, signs and symptoms, prevention techniques and open discussions of what they can do as a family to avoid getting dengue.

Communities are happy with the laminated handouts containing information taken from the community-based health and first aid training tools which contains pictures and instructions on how to get rid of the breeding spots. There is also a handout from the ministry of health that has different pictures to reinforce the educational messages.

**Challenges:** It is a time consuming activity but a very satisfying one in helping those in need. However, it has been challenging for volunteers as a number of them also have full-time jobs to focus on.

## Health promotion

**Objective:** Awareness on dengue and preventive methods are disseminated through an information, education and communication campaign for up to 8,000 people in Rarotonga, Aitutaki and Mauke.

Activities planned:

- Access of available information, education and communication materials from the International Federation's community-based health and first aid manuals and the ministry of health
- Production of brochures with local language translation
- Distribution of brochures and posters in schools and other public venues
- Dissemination of information through radio spots
- Distribution of printed materials on dengue prevention information through house-to-house visits
- Integrate dengue prevention information in all ongoing CIRC community workshops
- Include the outer islands branches that are not yet affected including the two islands that reported cases

**Progress:** Information from the community-based health and first aid teaching tools on dengue were replicated and laminated before being distributed together with an information leaflet from the ministry of health, complementing each other. These are used to discuss dengue fever with the family and they are left with the supplies for reference and further discussions amongst the families. Some of the information is translated in to Cook Islands Maori, and discussions are bilingual where necessary. Ongoing community-based health and first aid programmes are also carried out in schools, including to 190 students at a primary school who received 'people saver training' (introduction to first aid). The ministry of health has also distributed leaflets through out the schools.

<sup>1</sup> A family kit (for six people) lasts for one month and consists of six aerosol mosquito repellent (adult), two roll-on repellents (child) and four aerosol cans of house spray insecticide.

Dissemination of information through television, newspapers and the radio, together with IEC materials and door-to-door visits, have ensured that communities are kept informed of the ongoing situation and are provided with advice and materials to address with the outbreak. In addition, CIRC staff and volunteers have also used the opportunity of their community outreach to include A (H1N1) preventive messages as well.

The same IEC materials produced are used for the outer islands kits as well and the discussions with families will be carried out by branch volunteers. The branch volunteers will translate the information in to their own dialects for better understanding of the community.

The communities are maintaining preventive measures including cleaning their houses and yard and being proactive with using repellents, mosquito nets and staying away from affected areas. The IEC materials are seen to have impact on communities as islanders change their previous disregard for spray repellents and recognize the necessity and usefulness of these measures.

**Challenges:** People have lived with dengue for a long time and some community members consider it the norm. However, as people share their experiences of the effects of dengue and its impact on health and livelihood, there is a change in the mentality to protect and prevent getting it. There is the economic consideration of losing earnings as some people are off work for a while and difficult to make ends meet.

## How we work

All International Federation 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 is committed to the [Humanitarian Charter and Minimum Standards in Disaster Response](#) (Sphere) in delivering assistance to the most vulnerable.

The International Federation's activities are aligned with its Global Agenda, which sets out four broad goals to meet the Federation's mission to "improve the lives of vulnerable people by mobilizing the power of humanity".

### Global Agenda Goals:

- Reduce the numbers of deaths, injuries and impact from disasters.
- Reduce the number of deaths, illnesses and impact from diseases and public health emergencies.
- Increase local community, civil society and Red Cross Red Crescent capacity to address the most urgent situations of vulnerability.
- Reduce intolerance, discrimination and social exclusion and promote respect for diversity and human dignity.

## Contact information

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

- Cook Islands Red Cross: Ms. Niki Rattle, Secretary General, phone: +682 22 598; email: [cookis@redcross.org.ck](mailto:cookis@redcross.org.ck)
- Pacific regional office in Suva, Fiji: Ms. Aurélia Balpe, Head of regional office, email: [aurelia.balpe@ifrc.org](mailto:aurelia.balpe@ifrc.org), or Ms. Ruth Lane, Regional disaster risk reduction delegate, [ruth.lane@ifrc.org](mailto:ruth.lane@ifrc.org), phone: +679 3311 855, fax: +679 3311 406

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- Resource mobilization & planning, monitoring, evaluation and reporting (PMER) unit: Ms. Penny Elghady, Resource mobilization & PMER coordinator, email: [penny.elghady@ifrc.org](mailto:penny.elghady@ifrc.org), phone: +60 3 9207 5771
- For pledges of funding: [zonerm.asiapacific@ifrc.org](mailto:zonerm.asiapacific@ifrc.org)

[<interim financial report below; click here to return to the title page>](#)

# International Federation of Red Cross and Red Crescent Societies

MDRCK001 - Cook Islands - Dengue Outbreak

Interim Financial Report

Selected Parameters	
Reporting Timeframe	2009/1-2009/6
Budget Timeframe	2009/5-2009/9
Appeal	MDRCK001
Budget	APPEAL

All figures are in Swiss Francs (CHF)

## I. Consolidated Response to Appeal

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
<b>A. Budget</b>	50,000					50,000
<b>B. Opening Balance</b>	0					0
<b>Income</b>						
<u>Other Income</u>						
Voluntary Income	50,000					50,000
C5. Other Income	50,000					50,000
<b>C. Total Income = SUM(C1..C5)</b>	50,000					50,000
<b>D. Total Funding = B + C</b>	50,000					50,000
<b>Appeal Coverage</b>	100%					100%

## II. Balance of Funds

	Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination	TOTAL
<b>B. Opening Balance</b>	0					0
<b>C. Income</b>	50,000					50,000
<b>E. Expenditure</b>	-50,000					-50,000
<b>F. Closing Balance = (B + C + E)</b>	0					0

## III. Budget Analysis / Breakdown of Expenditure

Account Groups	Budget	Expenditure					TOTAL	Variance
		Goal 1: Disaster Management	Goal 2: Health and Care	Goal 3: Capacity Building	Goal 4: Principles and Values	Coordination		
A		B					A - B	
<b>BUDGET (C)</b>	50,000					50,000		
<b>Supplies</b>								
Medical & First Aid	33,022						33,022	
Utensils & Tools	3,342						3,342	
<b>Total Supplies</b>	<b>36,364</b>						<b>36,364</b>	
<b>Transport &amp; Storage</b>								
Distribution & Monitoring	668						668	
Transport & Vehicle Costs	5,049						5,049	
<b>Total Transport &amp; Storage</b>	<b>5,717</b>						<b>5,717</b>	
<b>General Expenditure</b>								
Information & Public Relation	4,000						4,000	
Other General Expenses	668						668	
<b>Total General Expenditure</b>	<b>4,668</b>						<b>4,668</b>	
<b>Programme Support</b>								
Program Support	3,250	3,250				3,250	0	
<b>Total Programme Support</b>	<b>3,250</b>	<b>3,250</b>				<b>3,250</b>	<b>0</b>	
<b>Operational Provisions</b>								
Operational Provisions		46,750				46,750	-46,750	
<b>Total Operational Provisions</b>		<b>46,750</b>				<b>46,750</b>	<b>-46,750</b>	
<b>TOTAL EXPENDITURE (D)</b>	<b>50,000</b>	<b>50,000</b>				<b>50,000</b>	<b>0</b>	
<b>VARIANCE (C - D)</b>		<b>0</b>				<b>0</b>		